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AN EXPLORATION OF IMMIGRANT WOMEN'S EXPERIENCES WITH SOCIAL  
SERVICE AGENCIES IN THE REGION OF WATERLOO

by

Gillian Wells, BSW  
University of Waterloo, 2006

THESIS

Submitted to the Faculty of Social Work  
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## Abstract

The purpose of this qualitative research project is to explore the experiences of immigrant women as they relate to their interactions with social service agencies, in an effort to understand how these women give meaning to their experiences and how those experiences impact their future behaviour. It is hoped that this study will provide an increased understanding of immigrant women's interactions with service agencies for the benefit of social service providers aiming to apply a best practice approach in their service to newcomers.

This qualitative study consists of semi-structured interviews with 25 women representing 21 different countries. This research was carried out using a feminist lens and the data was analyzed using a thematic analysis. The findings of this study revealed that the knowledge of immigrant women's journeys to Canada is significant as it is part of their reality and may contribute to feelings of vulnerability. In addition, it did not appear that ethno-specific agencies delivered more favorable services than 'mainstream' agencies. The participant's perception of the quality of the service they received appeared to be based on the information conveyed through nonverbal behaviour, mode of communication and conduct. Feelings of hope, confidence and happiness emerged from the positive experiences while anger, shame and humiliation were reported as resulting from the negative experiences. The impact of these experiences had on immigrant women is noteworthy for social service practitioners. Suggestions for the improvement in the delivery of service are outlined since educating and training for service providers are

recommended as part of a continual commitment to make social services a resource that immigrant women are willing to use and refer others to use.

## Acknowledgments

Along this road that I walked to arrive at the completion of this thesis, there were persons who walked alongside me and I would like to take this opportunity to acknowledge them. I would like to thank my committee members including Funke Oba and Jassy Narayan who brought the voice of diversity and community to this process. Thanks to both Dr. Anne Westhues and Dr. Susan Cadell for your guidance and support as you provided me with much valuable feedback. As for my thesis supervisor, Dr. Ginette Lafrenière, I learned so much about feminism and empowerment from you. You guided me both gently and firmly along this path in my academic career. Thank you so much for your time, patience, guidance, wisdom and strength. You share so much of yourself.

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## Chapter 1

### Introduction

The number of immigrants arriving in Waterloo Region has increased significantly in recent years with the Region working hard to attract foreign-trained, skilled professionals (Miedema & Vandebelt, 2006; Region of Waterloo Public Health, 2004). There is a growing body of research, reviews and reports on topics related to immigrants; however the majority has focused on Canadian labour market needs (Brower, 1999; Centre for Research and Education in Human Services [CREHS], 2003; Miedema & Vandebelt, 2006; Mojab, 1999; Region of Waterloo Public Health, 2005). While immigrant newcomers have often been studied as a cohort, research has shown that women experience immigration and settlement differently from their male counterparts (Darvishpour, 2002). Research of newcomer women and their unique needs is slowly emerging in the social service and healthcare scholarship.

#### *Purpose and Rationale*

My interest in this area stems from two areas of my life, one, as a community organizer and the second, more importantly as a woman of immigrant descent. Both of my parents are Caribbean. They immigrated to England during the 1960's in what Thomas (1980) refers to as an immigration wave of West Indians to Great Britain between the period of 1960 to 1970 in which their numbers, "reached a dramatic climax" (p. 72). Ironically, during that period of time, West Indians were viewed as

replacement population in geographic areas where demand for labour was high (Peach, 1967). My brother and I were born in England. Shortly thereafter our family immigrated to Canada where I was raised from the age of three. As a family we were fortunate that, although we were immigrants, English was our mother tongue which facilitated our integration into Canadian society. I refer to myself as a second generation immigrant. Some thirty years later, as I work side by side with newcomer women I cannot help feeling a sense of solidarity with their struggles and outrage at what they go through. Narayan (1994 cited in Payne, 1997) suggests that members of minority groups, such as myself, have an 'epistemic' privilege in that we understand more directly the lived experiences of oppression, since it can be a regular part of living as a visible minority in Canada. In my situation, I feel that this privilege has allowed me, as a researcher, to have an intimate knowledge of the subject that I have chosen to research.

My practice as a community organizer has meant working with immigrant women in different agencies, programs and contexts within the Region of Waterloo. During that time, the distinct needs of immigrant women continually came to my attention. Referrals to other agencies were part of many organizations' mandates; however, immigrant women often did not access the referred service or when they did, returned with negative comments about the experience and the service they received. The frequency with which this occurred was the impetus to ask questions and investigate what these experiences were. Why were these women not accessing services that were readily available to them? When they did contact an agency, why did they not return despite being in dire need of the service? What made a woman experience the

services of a particular agency positively? These questions need to be answered throughout a newcomer's settlement and integration process since it is experienced on a continuum. Being aware of the unique barriers that female newcomers encounter, I have proposed this research project as an avenue to investigate the questions I encountered in the field and to provide a space for immigrant women to have their voices heard.

The purpose of this qualitative research project is to explore the experiences of immigrant women as they relate to their interactions with social service agencies, in an effort to understand how these women give meaning to their experiences. It is hoped that this study will provide an increased understanding of immigrant women's interactions with service agencies for the benefit of social service providers aiming to apply a best practice approach in their service to newcomers.

A brief discussion of the background that provides the rationale for this study is provided. This includes a look at immigration in Canada, changing demographics in the Region of Waterloo, the predicted increase in demand of services from this population, and finally the limited amount of research on this subject.

### *Summary of Demographics*

#### Immigration in Canada

In the past 10 years, Canada has welcomed, on average, 220,778 immigrants and refugees a year, with Ontario attracting approximately 60 percent of immigrants on an annual basis (Region of Waterloo Public Health, 2004). Canada has a long history of attracting immigrants; however, in recent years the number of immigrants arriving from

South Asia, Asia, Africa, Central and South America and the Middle East has increased (Statistics Canada, 2005). The Waterloo Region itself attracts a considerable number of immigrants. According to the 2001 Census, 21 percent of Waterloo Region's population was made up of immigrants and Statistics Canada projects future growth to be between 26.6 percent and 32.2 percent in the next 25 years (Miedema & Vandebelt, 2006).

Since Canada is committed to welcoming immigrants, the federal and provincial governments have specific programs to address immigration, settlement and other related issues. The federal government recorded over \$170 million in expenditures toward these programs in the fiscal year 2003-2004. It has allocated \$920 million in a new federal-provincial collaboration to look at, amongst other things, the unmet needs of newcomers, gaps and challenges, optimal ways of delivering services and new delivery models (Government of Canada, 2007).

#### Changing Demographics in the Region of Waterloo

The most recognizable change in the Region of Waterloo is the growing shift in the demographics of the Region's population. Currently, one in five residents in Waterloo Region is an immigrant and the Waterloo Region area has the fifth highest per capita immigrant population of all urban areas in Canada (CREHS, 2003). This shift includes an increase in immigrants who are visible minorities.

Federal and provincial governments have significantly funded programs to attract new immigrants and to help them to settle in Canada. The projection is that by the year 2010 the net labour market growth will come from immigrants. The

socioeconomic benefits of immigrants have been well documented (Canadian Labour and Business Centre, 2004) and highlighted on political platforms and the media (Etherington, 2005; Reitz, 2005). The then Immigration Minister Joe Volpe commented that Canada was wasting an opportunity to be globally competitive by not recognizing the skills of recent immigrants who have been described as the best and the brightest (Laidlaw, 2005).

#### Increase in Demand for Services

It is reasonable to presume that women who are new to Canada will interact with a number of agencies as they go through their 'settlement' process. Their need for services will vary from initial settlement issues, housing, employment, childcare, healthcare and more. In my field experience and observations at work, I encountered women new to Canada who sought services for employment, transportation, appropriate childcare, ESL classes, social contact and access to medical health care. Findings by Darvishpour (2002) also indicate that the settlement needs of newcomer women are not being met by social service agencies in some European countries such as Sweden while some Canadian studies have looked at the need for more responsive services to address the needs of immigrant women (MacLeod & Shin, 1990). Rockhill & Tomic (1994) echo this sentiment and draw attention to the often 'vicious circle' of scarce subsidies, full English as a Second Language (ESL) classes and no subsidized day care spaces, that many immigrant women find themselves in.

It is also documented that immigrants whose first language is not English do not fare well in Canada (Daly, 2006; Mojab, 1999). Immigrant women manage considerably less well than their Canadian counterparts economically and in access to services (Mackinnon, 2000). Upon entry into Canada, the male partner (husband) is usually designated as the principle applicant while the female partner (wife) becomes a dependent (Government of Canada, 2007). According to Rockhill and Tomic (1994) this institutionalized sexism imposed by the government contributes to the unique challenges facing these women. This is compounded by Canadian policy and programs where immigration itself is governed at the federal level whereas the responsibility for the delivery of health and social services is provincial. “The devolution process is a critical factor in the health and social service delivery to immigrants and refugees,” (Stewart, Neufeld, Harrison, Spitzer, Hughes & Makwarimba, 2006, p.330). The literature demonstrates that newcomer women experience immigration very differently from their husbands and male counterparts; they face challenges with low literacy levels in Canada’s official languages and their own mother tongue, social isolation, fear of deportation, conflict in gender roles, increased levels of poverty and domestic violence (Darvishpour, 2002).

#### Limited Research on Immigrant Women

As there are few studies on the subject of how newcomer women experience the services they receive, any research that expands our knowledge of the needs of this group and peels away the layers of their issues will benefit social service providers,

policy makers and ultimately immigrant women themselves. Without this expansion in knowledge the personal and professional cost to women and social service agencies will mount, as evidenced in a recent newspaper article in the Globe and Mail entitled, “Immigrants can suffer in silence within walls of suburbs. Isolated lifestyle can become a recipe for depression, resentment – even death,” (Reinhart & Rusk, 2006). This article reported on an immigrant mother charged in the slaying of her two children, illustrating the need for more effective social supports for immigrant women.

The nature and depth of this particular research study is important as it sheds light on immigrant women’s experiences as they navigate a somewhat frightening system; it provides recommendations for agency changes in their practices in order to create more nurturing spaces for immigrant women.

It is evident that changing demographics will lead to more diverse populations accessing social services in the Region and that these interactions will lead to different experiences for each party involved. This potential increase in use of services will continue to move the virtually unexplored social issue of immigrant women’s experiences as they interact with agency services, into the forefront of the social service field and create a demand for the appropriate delivery of those services (Truelove, 2000). It is essential that social work research shifts its focus to address this change in demographics and its consequent impact on service delivery.



### *Definitions*

For the purpose of this thesis, there are two specific terms that require defining: ‘immigrant’ and ‘social service agency’. While immigrants are accepted into Canada by way of one of three categories - economic immigrants, family-class immigrants and refugees (Miedema & Vandebelt, 2006), in this particular paper, the term immigrant will be used interchangeably with newcomers but the sample will consist of women who were born outside of Canada.

For this study, the term ‘public and non-profit social service organizations’ will be used interchangeably with social service agencies in this thesis. Gilbert and Specht (1981) provide a broad statement of social services which involves “a more inclusive mission of enhancing human development and the general quality of life for all who are in need (p.2). Services provided by public and nonprofit organizations include *social services* which are “personal or community services provided to help individuals and families improve their social well being” (Hick, 2002, p.10). *Social services* is the concept to be defined as a non-profit agency that provides community, employment, mental health and health services that address basic human needs while services such as Ontario Works are considered public sector services and is also included in the definition used in this thesis.

## Chapter 2

### Literature Review

A review of existing literature on immigrant women and relative to social and health service users was carried out in an effort to establish the need for this study and to provide a context for the findings. Much of the literature found on the subject of immigrants was in the area of employment and often did not make specific mention of gender. Though this is of importance in the settlement process of newcomers, a growing body of research is emerging in the area of immigrants and access to services; this is predominantly found in the research area of health care rather than social services.

The scholarship reviewed for this research study begins with the subject of women's experiences of immigration and settlement, followed by gender roles in the family and domestic violence. The matters of racism and sexism as they relate to immigrant women are explored next. Following that is a review of the literature on the subject of service users' experiences and factors involved in the successful adaptation of immigrants. Finally, this study will look at the research being carried out by the health care sector, which includes programs that have found success in becoming more accessible to newcomer women.

### *Women's Experience of Immigration and Settlement*

Women experience immigration and settlement differently than their male counterparts (Oxman-Martinez, Abdool & Loiselle-Leonard, 2000). In commenting on her research, Roxana Ng (1981; 1992) related that her focus on immigrant women was not accidental in that research has for too long treated the experience of men and women as essentially the same and that as a group, very little attention had been paid to women in terms of research. This is due in part to the fact that immigrant women do not occupy the same social location in the Canadian context as men. The difference being, that “the official view of the immigrant family, according to immigration procedures, is that of one ‘independent’ member [usually the male] on whom others [the wife and children] depend for their sponsorship, livelihood and welfare” (1992, p.21). This focused attention on newcomer women fills the gap of research needs for gender issues and newcomers to Canada.

Some studies focused more specifically on African/Black women as a group as the researchers felt that as a cohort, they experienced their social world differently from men and non-Black women in terms of how they experience oppression, subordination, exploitation and discrimination as a result of both their gender and status as visible minorities (Elabor-Idemudia, 1999).

Truelove's (2000) research found that the settlement and immigration experience differ for women in comparison to men because often the husband will be in the workforce leaving the wife at home, alone with young children and isolated. The immigration process itself systematically structures inequality within the newcomer

family by making one spouse – usually the wife – legally dependent on the other – usually the husband. Her research focused on services for immigrant women in the Toronto Region, the implications of accessibility based on agency location. She noted that, until recently, women were ignored in social service delivery policies as their social isolation was not taken into consideration in such services. She concluded that agencies were beginning to respond to the settlement needs in their areas. Truelove (2000) summarizes “Canadian settlement programs favour those destined for the labour market” (p.139). As noted above, there are settlement issues that face those who are not destined for the labour market. Often, women arriving in Canada do not have the skill base or language proficiency to enter the labour market immediately, so they are not entitled to services that their husbands or male immigrants are entitled to access.

It is recognized that immigrant women struggle with many of the changes they face as newcomers to Canada and has been argued that the problems that newcomer women face are products of the Canadian context rather than their cultural background (Ng, 1981). According to the literature, it is evident that immigrant women have found themselves at the lower end of the social ladder in Canadian society, especially those who do not speak English (Dossa, 1999). Immigrant women have been described as being invisible and isolated populations (Oxman-Martinez, Abdool & Loiselle-Leonard, 2000). Dossa (1999) referred to the double jeopardy that these women face as a result of their gender and ethnicity, while Seiler (1996) termed it a “double vulnerability to being marginalized on the basis of gender as well as ethnicity” (p.52). Ng and Estable (1987) grouped immigrant women, along with visible minority and Native women as

“one of the most invisible and disadvantaged segments of society” (p.29). This evidence of vulnerability should not serve as a stereotype of newcomer women as being ‘poor, powerless women.’ Rather this information provides crucial insight into the valid and real experiences that shape their identity within a Canadian context.

Issues related to social isolation, fear of deportation, language barriers and loneliness affect women more than they do men as women face a greater number of changes related to social, familial roles and their health (Meadows, Thurston & Melton, 2001). Darvishpour (2002) comments on this shift in familial role in her research by pointing out that change in gender-based roles in the family may occur as women gain more power in a societal context where women are supported, such as in Sweden. Newcomer women to Canada often experience a feeling of not belonging (Rockhill & Tomic, 1994). This lack of connectedness and the low status that they hold in this country, along with a poor fluency or familiarity with the language, contribute to the stress which research participants for this study by Rockhill and Tomic (1994) have described as frustrating and as factors influencing their access to service. Additional feelings identified by research and associated with change resulting from the immigration process were: stress related to the uncertainty of those with refugee status, fear, disorientation and “feelings of unreality that often accompany the uprooting experience of immigration,” isolation and adapting to a new society which contributes to the vulnerability of this population (Dossa, 1999; Elabor-Idemudia, 1999; Mackinnon, 2000, p.22; Mojab, 1999; Sword, Watt & Krueger, 2006). Compounding the issues that face newcomers is the lack of homogeneity amongst that population;

therefore, when studies focus on gender, attention must be paid to the diversity of cultural backgrounds within the population (Hyman & Guruge, 2002).

### *Experiences of Service Recipients and Barriers to Service*

The research surrounding experiences of users of health services or social services have produced findings that demonstrate the need for further research in this area. In the United Kingdom, where the government has been working on an initiative of delivering race equality within its mental health services, in an effort to address the inequalities in provision of health services, an extensive study was carried out investigating the views of South Asian service users. Their findings were categorized in terms of exclusions. Cultural exclusion reflected deficiencies in the front line work such as difficulty in understanding what users said and reflected in the cultural competence of staff. Institutional exclusion was reflected in the standards and procedures in which the agencies operated. In both instances, users were left feeling frustrated due to services that were described as being insensitive and lacking in effort (Bowl, 2007).

Research from the United States in the area of immigration has often focused on African-American or Latino communities. A study by Bender, Harbour, Thorp and Morris (2001) looked at the perception of quality of prenatal care among Latina women. In general, it was noted, there is “an increasing need to understand the quality of care and service from the perspective of the user and that assessing the perception of quality of care is often a low priority for health service providers” (p.780). Their findings were somewhat similar to the previous study from the United Kingdom. The Latina women

used the word *platicar* (to chat) frequently throughout their responses to describe what they valued in their interactions with service providers. For the group of women in this study, chatting with the service provider was a part of what they felt was a good quality of service. Both of these studies provide rationale for the continued study of the experience of service users as health care and social service agencies attempt to reach the broadest population that they have the potential to serve.

There is further emerging documentation of the barriers that immigrant women face in accessing services. A great deal of attention has been paid to the barriers that these women face which include marginalization and the social processes that reinforce them (Elabor-Idemudia, 1999; Hyman & Guruge, 2002). Hyman & Guruge (2002) describe this diverse group as facing “multiple cultural, linguistic and systemic barriers to healthy behaviour” (p.186). Other identified barriers that discouraged use of the system included unequal access to services, negative perceptions of health care services, racism and institutional discrimination (Stewart et al., 2006).

In her study of immigrant women’s accessibility of health care Mackinnon (2000) observed that about half of the sample interviewed found the health care system not culturally sensitive, which was consistent with findings from other studies (Stewart et al., 2006; Sword, Watt & Krueger, 2006). An interesting finding in Mackinnon’s study was that some of the women indicated that the gender of their doctor was not as important as was how they related to them and how they were spoken to. This is significant because for some women from specific religious backgrounds or regions of the world, the gender of their service provider, especially a doctor, can be very

important. For others, however, the care they received was more important than who was delivering it.

Language was also identified as a significant barrier to adequate access to service. Language barriers were recognized by both health care providers and the study participants as being problematic. The women who had been sampled in the research had indicated that they were aware that their inability to speak English was a barrier that limited their selection of health care and social service providers (Oxman-Martinez et al., 2000; Sword et al., 2006).

The health care field is an area that has paid attention to the different needs of immigrant women for several years, which may be as a result of the universal nature of health care. Health sciences journals contain research literature that centres on new Canadian women and their need for culturally appropriate services. Health care providers have become increasingly aware of the diversity of their clients and for the need to deliver appropriate and responsive health care services to immigrants, particularly women (Murty, 1998). The research areas studied were: the deterioration of immigrant women's health from the point of arrival into the country to several years later (Hyman & Dussault, 2000; Oxman-Martinez et al., 2000), prenatal care (Hyman & Guruge, 2002; Milne, 2005) and health education outreach programs (Murty, 1998). The researchers in the health sector recognize important issues related to immigrant women, as noted by Hyman and Dussault (2000) "...they [the women] are an invisible, isolated population within Canadian health interventions" (p.394). Additional studies have been able to identify medical and mental health issues that these women face such



as the understanding that post traumatic stress disorder can have a negative impact on a woman's language acquisition skills. This gives educators a better understanding of students who may remain in ESL classes longer than is recommended (Cole, Espin, Rothblum & Blackwell, 1995).

It is reasonable to assume that immigrant women will come in contact with the health sector out of necessity for childbirth as well as when they require other medical attention. Research has shown, though, that immigrant women use health care services far less than other women (Equal Opportunity Consultants, 1993 in Murty, 1998). This in turn, has led medical professionals to document their findings and to explore this population further. One study in particular by Meadows et al. (2001) examined how immigrant women perceived their health-related experiences. Part of the purpose of the research was to gain an understanding of how the women gave meaning to their experiences. Again, the findings found English proficiency to be linked with newcomer women's quality of interaction with the health care system.

The argument in favour of the need for culturally appropriate strategies to be developed in order to serve these women better has been intelligently and legitimately argued (Oxman-Martinez et al., 2000). What remains to be done is for social services to explore this group with as much vigor as the health care sector has.

### *Gender Roles in the Family and Domestic Violence*

Understanding an immigrant woman's role within her family will help in furthering our knowledge of her experiences with health and social services. The

subject of gender is often best examined within the role of the family. Studies by Darvishpour (2002) and MacLeod and Shin (1990) investigated the impact of immigration on gender roles and power in family relationships and found that the process of immigrating impacted each member of the family differently.

The narrative studies on newcomer women and domestic violence discussed the female immigrant experience noting their double vulnerability as a result of being marginalized on the basis of gender as well as ethnicity (McDonald, 1999; Rockhill & Tomic, 1994; Seiler, 1996). Further studies indicate that immigrant women experience and respond to domestic violence differently than mainstream women, and that it occurs within a cultural context with factors such as lack of language proficiency in English, migration history, gender roles, religious traditions and family structure impacting further on the situation (Shiu-Thornton, Senturia & Sullivan, 2005; Sullivan, Senturia, Negash, Shiu-Thornton & Giday, 2005).

The study by Darvishpour (2002) on the divorce rates among recent immigrants in Sweden took an in-depth look at the shift in power and gender roles in a marriage after immigration. It explored how relocating to a socialist state that has services that support women contributes to the wife's decision and ability to leave an unsatisfactory marriage. The divorce rates for non-European families were significantly higher than for Swedish families, with families from Iran experiencing the second highest rates of divorce upon arrival in Sweden with Chileans being the highest.

Darvishpour comments however, that research on the immigrant woman as an oppressed, passive, ignorant and isolated woman is a stereotype that leads to a focus on

problems rather than strengths. While this may be true, an attempt must be made to reflect the women's perception of themselves, their roles in their families and within a Canadian context. When highlighting the problems that women experience, the purpose is not to stereotype, but to present their current reality, as they understand it and then to move from a position of hopelessness to one of empowerment.

### *Racism and Sexism Towards Immigrant Women*

A recurrent theme in much of the scholarship consulted is the racism and sexism that women who are new to Canada experience. This expression of sexism and racism is experienced at two levels: the individual level and the systemic level as a result of the systemic features of society (Ng, 1992).

Access to services is often hindered by obstacles such as racism and sexism that exist at broader levels. "Institutionalized sexism and racism work together with patriarchal family relations to place immigrant women at the bottom of the social scale," (Rockhill & Tomic, 1994, p.91). In much of the literature, criticism has been geared at the Canadian government's immigration policy and practices and its impact on the immigrant family, with specific attention paid to the implications for the woman. Studies looked at the oppressive nature of the husband's frequent designation as the 'principal applicant' while the wife, along with the children, is usually considered a dependent (Ng, 1992; Rockhill & Tomic, 1994). This immigration process of designating one person as the independent is a system that promotes and maintains the, "sexual inequality in the family by making one spouse the legal dependent of the other"

(Ng., 1992, p.21). This research goes on to describe the situation as “institutional discrimination against immigrant women [which] is built into the statutory services for immigrants” (p.22). This relegation of the woman as a dependant member has consequences for the woman as it has described her role in the Canadian context. Many of the Canadian studies that had newcomer women as their principle focus incorporated a discussion on the Canadian government’s immigration policy as it has widespread implication for women, their positions within their own family and the power or lack of power that they are able to exercise as a result. By doing this, researchers are connecting the broader policy to the individual and showing the potential damage that can occur as a result. The authors point to the need for the personal to be linked with the political. This speaks to the need for newcomer women to feel and become empowered to address their respective needs.

An example can be found in a female newcomer’s access to English as a Second Language (ESL) classes. For the large part, ESL schools provide childcare for children ages three and up and the availability of those spots is significantly limited. Correlate this with a family that has a number of young children, and it can be several years of living in Canada before the mother can have access to ESL classes.

### *Programs That Work*

Health care studies, reports and commentaries highlight the recurring theme of peer support as being an effective tool for immigrant women (Meadows et al., 2001; Murty, 1998; Oxman-Martinez et al., 2000). There are documented programs that show

the effectiveness in serving the specific needs of immigrant women in the community. The anecdotal feedback from women indicate that these agencies are, "...on the road to better outcomes" (Milne, 2005, p.6). Successful programs are described as being appropriate and responsive (Murty, 1998). This includes community outreach programs and peer supports. These findings were supported with a local project 'Onward Willow: Better Beginnings, Better Futures' in Guelph, Ontario that used the family visitor program to help married immigrant women caring for young children. This program was based on a peer-help, primary prevention and early intervention for young children model (Crouse, 1999). Some of the successful services include the Family Visitor program that helps to reduce the isolation the women and children feel in their community and to make sustainable linkages to supports in the community.

### *Research Needs*

In summary, what we do know is that women and men experience the immigration and settlement process differently and face barriers to service due to racism and sexism. What remains to be studied are the interactions that newcomer women have with social service and government agencies and what impacts they have on the women.

There is a shortfall of research on the subject of newcomer women and their distinct experiences as they interact with different service agencies, therefore studies that will contribute to the growing body of knowledge on immigrant women are needed. Research that is specific to the delivery of services to this population was found in health and medical journals. The health field has been very progressive in responding

and adapting services to meet these needs. In contrast, the social sciences journals remain relatively quiet in this area. The issues facing immigrant women and their experiences as they relate to access to services are noticeably absent in the literature and have not been adequately researched (Hyman & Guruge, 2002; Oxman-Martinez et al., 2000; Truelove, 2000). This lack of information in the social sciences indicates that this topic needs to be part of the social services discourse (Dossa, 1999).

The objective of this thesis research was to explore the feelings that immigrant women experience as they attempt to access services from social service agencies in the Region of Waterloo as well as other organizations, and to explore the identified attributes of the services they received. Further to the position of this paper, Hyman and Dussault (2000) put forth the notion that most immigrant studies have focused on the early years of settlement whereas settlement and integration are experiences on a continuum and thus require more research in this area. I will focus on this area by including in the study not only recent arrivals, but also women who have been living in Canada for several years. The review of the literature supports the need for a study such as this one that will concentrate on immigrant women in the Region of Waterloo.

We are beginning to have a reasonable understanding of the experiences of immigrant women. When accessing health and social services, little is known about their experiences in Region of Waterloo, however I will address this gap in the study that follows.

## Chapter 3

### Methodology

#### *Research Questions*

The purpose of this research project was to gain a better understanding of how immigrant women feel when they interact with social service agencies, their perception of those experiences and how those experiences impact their future behaviour with social services. This research project sought to answer the following questions:

1. How do immigrant women learn about social services available to them?
2. What draws women to social services? (What makes them choose to take up a referral? What makes them choose not to take up a referral?)
3. Did the help the women received address the need they had?
4. What characterizes a 'good' service encounter?
5. What characterizes a 'poor' service encounter?
6. How do these experiences impact the participant's future interactions with agencies in the community?

Using the information gathered from the answers to the above questions, recommendations have been made for service providers as to how they can enhance the experience of newcomer women using their services.

As this study attempted to explore and understand the research participants' experience, a qualitative methods study consisting of semi-structured interviews was used. When a rich description is required, Anastas (1999) notes that this method is suitable "to describe...poorly understood phenomena" (p.25); in this instance it is the

experience of newcomer women as service users within social service agencies in the Region of Waterloo. The use of interviews was frequently found in other studies of newcomers that were reviewed (Darvishpour, 2002; Meadows et al., 2001; Stewart et al., 2006). This research was carried out using a feminist lens, with emphasis on an anti-oppressive perspective. Using these theoretical underpinnings, the semi-structured interviews helped in the gathering of information about the participants' interactions with services delivered by agencies and organizations, encouraged the sharing of experiences, allowed the participants to give meaning to their experience by describing whatever events seemed significant to them, and increased their sense of empowerment as their voices were documented (Dominelli, 2002).

### *Qualitative Research*

Qualitative research was selected as the best methodology for this study as it allowed me as a researcher "to understand human experiences from the perspective of those who experience them," (Yegidis & Weinbach, 2006, p.21). As this research was an exploration that was attempting to document the experiences of immigrant women as they interact with social service agencies, the data collected was sorted, analyzed and interpreted to help develop a theory about particular interactions.

The use of this inductive approach to data gathering allowed the theory to emerge from the data. Interviewing offered an opportunity to capture the participants' words, ideas, thoughts and the meanings they attached to their experiences. The purpose of this study was to learn the way participants experienced their encounters, the



meanings they attached to these experiences and how they interpreted what they experienced (Kirby, Greaves & Reid, 2006; Silverman, 2005). Qualitative method allows the discovery of participants' perceptions and draws attention to the complexity of their interpretations, since this methodology focuses on generating new ways of seeing existing data (Morse & Richards, 2002; Reinharz, 1992).

In reviewing the existing literature on subjects similar to this research project, there was a consistent theme of the use of qualitative methods. The authors researching the perspective of service users made use of qualitative research in their research design while studies produced in the health care sector also made use of this methodology (Bender, Harbour, Thorp & Morris, 2001; Bowl, 2007; Elabor-Idemudia, 1999; Mackinnon, 2000). The methods used by these authors were interviews, intensive interviews, focus groups and self-reports with open-ended questions. Data insights gleaned from semi-structured interviews were used to guide the questioning and helped further define the research topic.

### *Theoretical Underpinnings -Feminist Theory*

Feminist theory was selected as the conceptual framework for this study because it is a "research that seeks to build knowledge about women" and "is designed to hear [their] voices" (Yegidis & Weinbach, 2006, p.181). Using a feminist theoretical perspective, this study sought to explore the unique experiences of newcomer women, frame them within their cultural context, and document the issues they face. As research from a feminist perspective is a "way of giving the subjective situation of women

greater visibility,” (Oakley, 1981, p.48), the selection of this theory was particularly appropriate for this group of women who have been described as being invisible and whose experiences have been overlooked (Ng, 1981; Oxman-Martinez et al., 2000; Rockhill & Tomic, 1994). In keeping with feminist theory, I attempted to bring from the obscure to the light the voices of immigrant women.

This framework is a good fit since immigrant women’s experiences have not been extensively researched. Service providers cannot respond appropriately when the issues, which include immigrant women’s experiences and their attendant voices, are not known to them. For this study, it was important that I hear and record what the research participant had to say rather than test my own hypothesis. Proceeding inductively by allowing the emerging data to guide the research process was critical. As this study proposed to explore women’s experiences and add to the knowledge base of this population so that their concerns can be addressed by society, the feminist view appeared to be the most appropriate framework to use.

Feminism views the relationship between the researcher and participant as non-hierarchical when the researcher involves herself personally in the research relationship with the primary intention of the validation of women’s subjective experiences (Fetterman, 1989; Oakley, 1981). Reinharz (1992) referred to women interviewing women as a “self-revealing and consciousness-raising potential of woman-to-woman talk” (p.23) while Ann Oakley (1981) devoted an entire chapter on ‘Interviewing Women: A Contradiction in Terms’ in order to explore the interactions between female researchers and female interviewees and the special challenges that sometimes occur as

a result. As a researcher, I felt it necessary to employ a technique that was mindful of the role of gender in the research process.

Using this theoretical framework in my approach to the study meant starting where the research participant is. The focus then moved to her experience, identifying key features of the experience, resources available, sources of power, power imbalances that exist and drawing attention to this by exposing the systemic forces that create these situations and working towards placing this situation on the agenda for social change (Dominelli & McLeod, 1989; Payne, 1997; Reinharz, 1992). Of particular relevance here are the feminist research assumptions that knowledge is socially constructed and that people experience the world differently.

### *Gender and Diversity*

Feminist theory, as a guide to social research has made room for women's experiences to be located within research. It is recognized, however, that there are limitations to this theory and that multiple criticisms have been directed at White feminists for not accommodating and reflecting the unique experiences of Black women as an example (Dominelli & McLeod, 1989; hooks, 1981; Reinharz, 1992). In the American literature, the tension is evident in the historical White roots of feminism among White middle class women while Black women have felt either left out or exclusively studied rather than being recognized as academic recipients to carry out research of their own (Reinharz, 1992). This criticism has also extended to the

accommodation of and the research of diverse women which would include the experiences of women from different ethno-cultural backgrounds.

As I worked reflexively on this study, I was conscious of my position as a researcher. Kirby, Greaves and Reid (2006) refer to this researcher positionality as a 'double knowledge' since as a person of colour I have more than one perception of reality based on my awareness of the reality of the majority culture's perception and the experiences of minority people. As noted in the previous section under a feminist framework, while the attempt is to convey the notion of a non-hierarchical relationship with the research participant, the reality that I found in the community was that I was still viewed as an authority figure from the university; therefore, I was still mindful of the inadvertent privilege that I carried. "Generating data from immigrant women raised many ethical, political and theoretical issues. The unequal distribution of power between the researcher and the researched is always present" (Mojab, 1999, p.123). This encourages a reflection, on my part, of my position as an outsider and insider of the group as the stories of exclusion, racism, sexism, alienation and isolation (Mojab, 1999) have sometimes been my stories. In my opinion, while the feminist movement traditionally has been forwarding the issue of gender, as a woman of colour I cannot separate my visible race from my gender like some of the participants of this study who are minorities based on their gender, their race and their linguistic abilities. I do recognize my privilege in that my mother tongue is English; therefore, I recognize that I do not share the same position as many of the newcomers to Canada.

Kirby and McKenna (1989) refer to the use of “methods from the margins [to] focus on describing reality from the perspective of those who traditionally have been excluded as producers of research” (p.64). As the purpose of this study was to record each participant’s reality within their context as an immigrant woman interacting with various social service agencies, it was felt that incorporating this perspective in my research would be helpful. Using this theoretical concept led me to be attentive to the reality of their present situations as women, wives and mothers; therefore some of the interviews were conducted at locations convenient for them such as at their home, and in some instances, while their children were in another room occupying themselves. For one participant, we took a break from audio recording while we picked up her son from junior kindergarten at the local school. The interview process did not stop as we continued to have a very revealing conversation on the subject while we walked to the school. For this study, my interpretation of women interviewing women meant accommodating their lives as I did with the walk to the school or when I purchased snacks and brought toys to occupy young children so that a mother could participate in this research project and be part of a knowledge building process. It did result in a great deal of traveling and in some instances repeat visits but this was necessary in order to reach a population of people who are not often featured in research.

### *Anti-Oppressive Perspectives*

The literature on anti-oppressive practice was chosen as a theoretical framework as I felt it was a perspective that compliments the use of feminist theory being used in this research study as issues related to gender and minority status are being examined.

In examining the word oppression, in her book '*Anti-Oppressive Social Work Theory and Practice*', Dominelli (2002) states that "oppression takes place in the social arena in the form of interactions between people" (p.9). This is an apt description as this study seeks to look at these interactions as they are played out in social service agencies. These interactions include issues that are related to power. Dominelli (2002) goes on to say that these interactions are "socially constructed through people's actions with and behaviours toward others" (p.9). This recognizes that the actions that people take towards each other can be harmful, more so within the context of the delivery of a social service to a person who is in need. An imbalance of power characterizes these interactions and is compounded by the linguistic barriers and feelings of vulnerability by the service user. If an agency is the sole service provider of a particular support and the relationship between the service provider and user is tenuous at best, the oppressive nature of the interactions has the potential to be very strong.

The use of anti-oppressive lenses helps us to recognize the power of an agency that delivers a service, program or product to a service user who is in need. This organizational power by extension is transmitted to the employees and volunteers and can be manifested in their relationships with service users. In this study, this notion of power reoccurs frequently as the research participants describe their experiences. From

the manner in which they describe these encounters it is evident that they are aware of the power imbalances that exist.

The anti-oppressive perspective brings the action oriented piece to this study as it is hoped that a summary of the findings will be distributed and presented to interested agencies in an effort to open up dialogue about how agencies in the Region of Waterloo can become more accessible to ethno-cultural groups, specifically immigrant women.

### *Sample*

For the purpose of this study, voluntary participants were selected based on the following demographic criteria: females over the age of 18; born outside of Canada; reside within the Waterloo Region; and possess a minimum level 3 in oral English. A more comprehensive description of the sample is illustrated in the Findings section of this paper. The minimum level for English language skills criteria was necessary in order for the interviews to be conducted without the use of an interpreter. In its ESL curriculum the Waterloo Catholic District School Board describes Level Three English as “[the level where] students who have already achieved a moderate level of English but want to improve their skills” (Waterloo Region Catholic District School Board, 2007).

As the purpose of this study was to investigate a broad collection of experiences, the non-probability sampling techniques of purposive and snowball sampling were used to recruit research participants “in which the investigator selects participants because of their characteristics” (Morse & Richards, 2002, p. 173). Key informants were consulted

as part of the snowball technique in order to help recruit members of different ethno-cultural communities to increase representativeness. These informants were natural leaders within their own community and recognized as being individuals who would be able to identify potential volunteers for the study. The use of key informants was effective owing to the 'tight-knit' nature of some of the ethno-cultural communities which required the use of the informants' ability to link the researcher to the specific community to find study participants (Anastas, 1999; Fetterman, 1989). In addition, it was hoped that this would help in addressing some of the distrust that has developed between cultural communities and researchers. A flyer advertising the study and its objectives was distributed to the key informants and members of ethno-cultural groups that I met in the community, in order to help recruit potential participants. A sample of the promotional flyer is attached in Appendix A. Once the interested participants contacted me, selection was made based on their match to the outlined selection criteria.

The use of the purposive and snowball sampling were exceedingly effective in the recruitment of study participants. It was anticipated that the sample size would be between fifteen to twenty participants. As participants were interviewed they referred other women who they felt might be suitable candidates for the study. My contact phone number was either given out or I was given the name of the person to contact with the permission of the woman involved; either by a key informant or a participant I had already interviewed. This resulted in an increase in the sample size to twenty-five participants. The response, in the field, from some of the women who had been interviewed, was one of interest and support for the need for such a study. The sample



size was 'cut off' at twenty-five interviews due to the volume of the data produced. Twelve more women expressed their interest in participating in the research study and were waiting to be contacted. They were telephoned and I explained the reason they were not included in the study – which was due to the stringent timeline that I was on and could not accommodate any more interviews. This was difficult to do for a number of reasons. First, in some instances research participants called these women telling them about the research and promoted interest in the research. Several women expressed their desire for an opportunity to participate and lend their voices however, they were unable to do so. Secondly, as a researcher I too wanted to include as many voices as were willing to volunteer but was constrained by the time limit of this study. It left me with the impression that this may be a topic that many newcomer women wanted to be part of and it provided me with the momentum and verification that this topic was indeed relevant and pertinent at this time. For those who were not able to be part of the study but wanted to participate, I look forward to having an opportunity to organize an information session based on the results of my research and will contact the women who were not included, my research participants and other interested women from the community where they will be able to participate and share their voices.

The twenty-five women who made up the sample for this study came from a wide range of ethno-cultural backgrounds which provided a large collection of experiences. The table *Demographics of Sample* provides information on the age, country of origin, years in Canada and the status as reported on by the participants.

No.	Age	Country of Origin	Years In Canada	Status
1	36	Palestine	4	Refugee
2	60	Pakistan	8	Family Sponsored
3	32	Columbia	4	Refugee
4	40	Iraq	8	Skilled Worker
5	44	Kenya	8	Spouse of Student (Student Visa)
6	35	India	3	Spouse Sponsored
7	38	Jordan, Saudi Arabia & Palestine	8	Skilled Worker
8	35	Somalia	10	Spouse Sponsored
9	40	Afghanistan, Pakistan	4 ½	Refugee Claimant
10	38	Kashmir	1 ½	Skilled Worker
11	29	Saudi Arabia, India	10	Spouse Sponsored
12	20	China	5	Skilled Worker
13	35	Pakistan	1	Spouse Sponsored
14	29	Syria	7	Refugee
15	32	Mexico	4	Spouse Sponsored
16	41	Ethiopia (Saudi Arabia, Italy)	5	Refugee
17	36	Palestine (Lebanon, Iraq)	4	Landed immigrant
18	43	Romania	1	
19	44	Sudan	3 months	Refugee
20	27	Guatemala	6	Spouse Sponsored
21	24	Egypt	8	Skilled Worker
22	42	Peru	6	Spouse Sponsored
23	45	Afghanistan	4	Landed immigrant
24	39	Eritrea, Ethiopia	6	Refugee
25	32	China	3	Landed immigrant

Some of the countries of origin were: Iran, Iraq, Columbia, Peru, India, Pakistan, Kashmir, Ethiopia, Sudan and Mexico. In the column under the title 'country of origin' several of the participants identified more than one country as they included their country of birth and the places they had lived. I chose to leave these multiple locations in the table as they are an indicator of the multiple origins that the participants identified with. This reflects the awareness that within the immigrant population there is a vast amount of heterogeneity and studying participants from only one country would not represent the experiences of a multicultural population. This sample of participants was homogenous in that they were women who had experiences as being newcomers to Canada, settling in a new country and having interactions with agencies in the region.

#### *Data Collection*

The interviews conducted were semi-structured in nature and followed the interview guide found in Appendix C. "The use of semi-structured interviews is appropriate when the researcher knows enough about the study topic to frame the needed discussion in advance" (Morse & Richards, 2002, p.94). Each interview was between twenty and ninety minutes in length, with the average interview being forty-five minutes long. The open-ended questions that were prepared and used were suitable for this study, as they allowed for additional discussion to take place and to help discover and confirm the participant's experiences and perceptions (Fetterman, 1989). Each question contained prompts that were regularly used, in order to guide the

questions, add clarification and gain a further depth of understanding of their experience. Other studies collecting data from immigrant populations have used similar qualitative methods as they have proven to be effective in gathering data as it allows the participants to speak about their own individual experience and maintaining the authenticity of the service user's voice (Bender et al., 2001; Bowl, 2007; Elabor-Idemudia, 1999; Mackinnon, 2000; Mojab, 1999).

A pre-test of the interview guide was carried out on a key-informant who is a representative of a cultural community. This confirmed that the guide was asking what it should and that the wording was appropriate to research participants whose first language was not English since "words and expressions have different values in various cultures" (Fetterman, 1989). As previously noted, each interview took place at a location that was comfortable for the participant, which may have been their home or a neutral location that encouraged disclosure of information and ease of participation.

Each interview was recorded using a digital audiotape machine. The tape was then downloaded using digital software to facilitate the transcription of the audiotapes. Interviews were transcribed verbatim shortly after they were conducted in order to document what was said in each interaction. After each interview, field notes of my reflections of the interview and the interview process were written out in a field journal. This field journal contained notes of my reflections, feelings, nuances or other emotional processes that may have occurred during the interview (Kirby & McKenna, 1989). These field journal notes augmented the transcriptions from the audio tape and helped me to understand my feelings about the process.

Given that the participants were not required to read, an interview guide and a semi-structured interview was a good technique to use with this population. While the guided questions gave the conversation some direction, it also allowed me to establish a relationship with the participant and conduct the interview in the form of a conversation. Oakely (1981), in her chapter 'Interviewing Women' in 'Doing Feminist Research' discussed the importance of establishing rapport as part of an interactive interview while Kirby & McKenna (1989) referred to an egalitarian setting where the participants feel free to ask questions. Both of these techniques were employed in this research as, in some cases, I needed to gently draw out the information through means of conversation rather than questioning them in a manner that duplicated the distant intake process of an agency. More often than not, however, the information provided was very forthcoming and required very little prompting. Not all interviews followed the chronological structure of the interview guide as some of the participants began the interview by discussing, in great detail, their various experiences. As this occurred, I allowed the participant to take the lead and where certain questions went unanswered, I revisited them in order to ensure that the pertinent data was gathered. I felt comfortable with this process as it reflected a natural conversation.

In other instances, some participants challenged my position as a researcher. In recounting a rather unfortunate story about being disrespected by a worker that produced strong feelings for the participant, I asked the next question on the interview guide which was, "How did that make you feel?" The response from the participant was, "How do you think that made me feel?" In this instance and in some others, the

participants tried to engage me in their feelings of anger or expected me to commiserate with their experience. I struggled with this as it may seem obvious what the response should be, I was cognizant of the idea that “the interviewer must pretend not to have opinions” since behaving that way might ‘bias’ the interview (Oakley, 1981, p. 36). While I shared with them that I could only imagine some of the feelings that would be as a result of such an experience, I was prudent in not providing any labels of how they should have felt as I wanted to hear how they experienced the interaction. In some instances, if a participant did not define their feeling but said, “She didn’t say anything to me. It was like I wasn’t there.” I felt comfortable labeling that as being ignored or providing them with an option of words to define what they had experienced.

#### *Interviewing Issues & Reflection on Interviews*

A number of researchers have noted both the unique considerations that need to be made and the challenges that arise in attempting to collect data from immigrant populations (Bender et al., 2001; Bowl, 2007; Mojab, 1999). “The collection of good data requires the best possible collaboration with participants. The researcher must find the right way to share with the participants so that they may trust and help the researcher” (Morse & Richards, 2002, p.90). This issue of establishing trust did arise in my data collection process.

In attempting to reach individuals who may not always be represented in research, efforts were made to meet them where they are at; therefore, all interviews were conducted in places that were convenient for the participant. In some instances I had to

make multiple visits to a community centre in order to obtain what I felt as a researcher were rich and textured stories of immigrant women who had experiences that were relevant to this study. I had been encouraged to contact these women by a key informant in the community. Since it was an established group of women that I was approaching and as a result of multiple negative experiences in the past with persons in the helping field, there was some resistance to my presence. I was encouraged to continue trying by the key informants. In order to create rapport and begin to form an element of trust with the women I had to visit the location several times. During those times, I played sports with the women, sat in on their groups – as invited by the group facilitator, and even took an origami class with them. In the end, three women felt comfortable enough to talk with me and agreed to participate in the study. This was a great learning experience, in conducting research in the community.

In this process of collecting data in the community, I was challenged by a group of women. While informally talking with one woman, four more approached and asked about my intention. As I identified who I was, what my purpose was, and what my research was about, they asked me in a dismissive manner if I did not know the answer to the questions that I was asking and that if I did not, then there was a problem. Others asked if I had the power to make changes to the system so that things would be better for them. I admitted to them the limitations of a student researcher. This encounter left me both frustrated and charged as the questions that they had asked me that evening were both honest and legitimate. I was not sure what my role was there, asking the women those questions. I also began to question the role of research and my role in it. I

felt that the world of academia had ‘collided’ with the real world. As a feminist doing research, I wanted to ensure that I was not exploiting these citizens in the community while at the same time recognizing the need for the voices of their experience to be heard by the stakeholders in the community. This has been my journey as a feminist researcher to guide this study so that it is able to inform as well as report.

### *Ethical Considerations*

The issue of consent was important from an ethical point of view as it related to participants from other cultures whose first language was not English. Mojab (1999) states that it is important for researchers to recognize that ‘generating’ data from immigrants raises ethical, political and theoretical issues as “the unequal distribution of power between the researchers and the researched is always present” (p.123).

To ensure that each participant had a clear understanding of consent, what they were agreeing to do and how the data will be used, extra time was allocated for each interview to explain what the letter of consent meant, prior to having the participant sign the consent statement. In one instance, a woman wanted to participate in the study but was firm that she would not sign the consent form. After a bit of discussion and establishing that she clearly understood the purpose of the study and her voluntary willingness to participate, I asked her why she would not sign the form and she responded that at her last ESL class a police officer had been in to talk about fraud and was very explicit that individuals should not sign papers unless it was at a bank. In respecting her understanding of the information that the police officer had shared with



her, I asked her and she agreed to put her initials on the line where her signature would normally have been.

Participants were encouraged to ask questions concerning the nature and purpose of the study. The process intended to be respectful of the participant's knowledge of English and any understanding they may have about research studies. The consent form contained a provision for permission to use their quotations as these provide a richer, in-depth anecdotal recounting of their story. All efforts were made to simplify the wording in the consent form while retaining all the necessary elements. In order to ensure that valid consent was given, the definitions, as they relate to the study, of privacy, confidentiality and anonymity were thoroughly explained and the participants were encouraged to ask questions if they required clarification as anonymity could be an issue for some members of ethno-cultural communities who were concerned that others from their community would 'hear' about what they had said. In one instance, three women who had been referred as potential interviewees were able to effectively communicate with me but were unable to fully read and understand the content of the consent form. Consequently, they were excluded from participating.

Care was taken to ensure that the questions asked employed a level of English that the participants would feel comfortable with, by avoiding professional terminology or ambiguous English words. Anastas (1999) reminds researchers interviewing members of cultures unlike their own to be aware of cultural and linguistic differences that may exist. As voluntary participants, members of the interview group were advised

that they could refuse to answer any questions and that they may discontinue the interview at any time; none of the participants did. In order to increase the anonymity of participants, pseudonyms were created by asking each participant to come up with an alternate name that would be used in the write up of the research.

### *Data Analysis*

The transcription of the interview tapes and the analysis of the data were carried out with the continual effort to ensure that the voices of each of the participants had an opportunity to be heard. In light of this, as quotations were written up, they were done so verbatim and reflected the language and the linguistic differences of each participant. This was done in order to retain the ‘flavour’ of their speech which often reflected their feelings and passion. Reinharz (1992) reported on a feminist British researcher whose “64 interviewees needed to tell stories in order to communicate meaning” (p.24) and she wanted to create the same impression for her readers. The participants of the current study also had stories to tell; stories of their experiences, both good and negative. All attempts have been made to keep the richness and texture of their stories while maintaining confidentiality and their anonymity.

### *Theoretical Sampling*

In developing the proposal for this research project, it was anticipated that the sample size would be between fifteen and twenty participants while the final sample size ended up being twenty-five participants. Some theoretical sampling (Anastas, 1999) was used after about twelve interviews as a means to help seek out potential

participants who might contribute new data. This was carried out by seeking participants who possessed characteristics that were not represented in the first twelve interviewees, such as different countries, nationalities, years living in Canada or age, which helped to make the sample more purposeful (Ezzy, 2002). As a result, one woman was identified as being in Canada for three months, which was quite new in comparison to the rest of the sample population.

Theoretical sampling (Anastas, 1999) resulted in theoretical saturation as there was little to no new information being provided by the interviews as the numbers increased. As a qualitative study “once you have begun to understand whatever it is you are studying, your sampling strategies normally are extended through theoretical sampling meaning that your selection of participants is directed by the emerging analysis, and the theory being developed from data is subsequently modified by data obtained from the next participants” (Glaser, 1978 as cited in Morse & Richards, 2002, p.67). I felt comfortable that the interviews conducted provided data that could be transferable to a similar population.

The transcriptions and field notes were entered into NVivo 7 software as a data analysis management tool. NVivo allows the researcher to create a variety of models that are multidimensional in nature and linked to data (Morse & Richards, 2002). The software allowed for the coding of the data into themes based on nodes and family tree nodes. Content analysis of the data began with the reduction of the data into manageable pieces (Anastas, 1999; Yegidis & Weinbach, 2006). There was cross analysis of reoccurring words and phrases which contributed to the development of

larger themes as part of flexible methods research which is to 'make sense' of the data collected (Kirby & McKenna, 1989; Yegidis & Weinbach, 2006). Some of the themes that emerged answered the original research questions of the attributes of a 'good' service as well as a 'poor' service. The participants' feelings of the experiences and how it affected them were grouped along similar thematic lines.

The coding process used was part of the thematic analysis that was employed on these data. The themes emerged from the data collected as an inductive process and were identified through processes of coding or by stepping back from the data and asking yourself, 'What is this all about?' then returning to the data to code portions that were relevant to the emerging theme (Ezzy, 2002; Morse & Richards, 2002).

Along with the emerging themes, I reflected on the field notes that I had created during the interview process. These proved valuable as they were able to supplement what I gathered from the interviews. It gave me the opportunity to document conversations that I had with the participants after the tape recorder was turned off, my reactions to the interview and reflections of the research process. Research from the margins (Kirby & McKenna, 1989) encourages reflection on the part of the researcher. Also, as Anastas (1999) states, field notes are a valuable source of data and can be incorporated into the data analysis itself which in turn supports the reliability of the data analyzed. These field notes held my "reflections immediately after each interview" (Kirby, Greaves & Reid, 2006, p. 204). I used them to record aspects of the interview that were not captured on audiotape, observations that I made and eventually the preliminary themes that were beginning to emerge from the interviews.

Finally, in the process of data analysis, I agree with the authors who indicate that the researcher is an instrument in the data collection process as it is not a passive process but one that requires a tremendous amount of investment on the part of the researcher (Morse & Richards, 2002). This was even more so as I carried out my research ever mindful of the feminist framework where the researcher is not a distant objective observer but is part of the creation of the data as my values and world views were part of how I processed the information received.

### *Limitations of the Study*

There were three main limitations of this study, two of which were based on the selection criteria. As the main purpose of this study was to explore women's experiences, gender was a key exclusionary factor with men not being included in the study.

The second limitation was also a result of the selection criteria which indicated that the participants to be involved in this research project required a minimum level three in oral English. Consequently, women who lacked sufficient English language skills to converse with me without the use of an interpreter were not included as part of the study as the intention was to be able to directly converse with the participants. It is important to note that as a researcher, I am aware that newcomer women who lack proficiency in oral English language skills may have very dynamic interactions with non-profit and social service agencies. It is, therefore, noted that their voices are missing in this particular research project.

My inability to return to the participants to 'check back' and confirm with them my interpretations of the experiences they shared in the interviews is the third limitation of this study. It would have been helpful to have brought the initial findings into the field to obtain feedback from the participants to make sure that I had captured their thoughts correctly. I plan to present my findings and have a discussion on them with ethno-cultural community groups which will include the participants of the study in an effort to obtain their feedback. I then intend to present the findings along with the feedback to social service and government agencies in the Region.

## Chapter 4

### Findings and Discussion

In this chapter the findings and discussion are presented together as I felt that the discussion was integral to the understanding of the findings and lent itself naturally to be sectioned together. The findings from the data analysis are presented in this chapter and reflect the deep, rich experiences of the research participants. It should be noted that all names and identifying details have been changed in order to maintain the participants' anonymity. The participants were involved in this process as they were asked to provide an alias name of their choice which was used in the writing up of the findings.

In this section, I will present a brief overview of the demographic characteristics of the research participants followed by a discussion on the limitations of this study. The data will then be presented describing and demonstrating the participants' journey to Canada and how they have accessed the social services here in Canada. Some attention will be paid to the types of agencies that were identified in the interviews and the power that is inherent to social service agencies. Findings on the 'good' and 'poor' service the participants experienced are explored. The chapter concludes with a summary of the comments and suggestions for the improvement of services provided to the women.

### *Demographic Characteristics of Research Participants*

The sample size for this study consisted of 25 research participants, representing a cross section of characteristics and countries of origin. The women ranged in age from 29 to 60 years old with the average age being 39 years old. They had been living in Canada between 3 months and 15 years with the average length of stay being 5.6 years. Some of the participants arrived in the Region of Waterloo directly from their country of origin while others have lived in other parts of Ontario prior to arriving in the Region. When asked to relate an experience of the service they received, those who had lived in other part of Ontario were requested to limit their story to an interaction they had with a service in the Region of Waterloo. As per the selection criteria, all of the participants lived in the Region, which included Kitchener, Waterloo and Cambridge.

The countries of origin that were represented by the participants were: Afghanistan, China, Columbia, Egypt, Eritrea, Ethiopia, Guatemala, India, Iraq, Jordan, Kashmir, Kenya, Mexico, Pakistan, Palestine, Peru, Romania, Saudi Arabia, Somalia, Sudan and Syria. The statuses upon their entry into Canada varied and are categorized as: refugee claimant, family sponsored, skilled worker, spouse of student (student visa) and spouse sponsored. As previously noted in the selection criteria, for this study the legal status of the participant was not significant. Of the 25, 24% were refugee claimants while 40% had been sponsored by their spouses; the remaining participants arrived as skilled workers or sponsored by family members. Eight of the participants indicated that they had learned English in their country of origin and were quite fluent.



### *The Journey to Canada*

In gathering the demographic data and information surrounding the participant's settlement in Canada, it became clear that their journey to Canada played an important role in how they made sense of the world around them. In interpreting the data, consideration had to be made for the importance of the life the participants had prior to arriving in Canada, their journey to this country, and what impact it had on them.

In this study, two types of stories emerged concerning their journey to Canada. The first came from the women who spoke about feeling very safe and happy upon arrival. This was especially true for the participants who came from a country experiencing political or civil unrest or all out war. Srwa, an unemployed science teacher with a Masters of Science degree from Iraq and living in Canada for six years speaks about how safe and relieved she felt after leaving her war-torn country:

When I came to Canada, for weeks every morning I would  
wake up and I would still not believe it. I remember, yes  
here we are in Canada, it is true it is not a dream.

Seltana came to Canada from Afghanistan through Pakistan a year ago with her seven children. She said that she came to Canada because it was safer for her children. She became very emotional as she spoke about the war that had been going on in her country for over ten years. She related the death of family members and neighbours and recounted that when she arrived in Canada she felt safe and noticed how quiet it was as there were no sounds of rocket mortars in the air. She describes it as follows:

I am feeling very happy because my country has two wars. There is explosion and bombs every day. Many, many people die. Broken buildings, broken houses, everything. I love my country but the war it is not good. I am sad for my country, my family, my friends. Lots of fights and fights. The Taliban. Lots of rockets. Many, many people die. It is not good for my daughters, it is not good for my sons. It is very important for me to be safe. Thirty years of war in my country. I am so tired of war.

In discussing their feelings around safety, one third of the participants spoke about it in terms of their children. They noted how safe it is in Canada for their children; implying that for some, one reason for coming to Canada was to raise their children in a safe environment.

The second type of story that I heard from the participants was the loss they experienced when they left their country to come to Canada. This included loss of possessions, leaving family members and friends behind and a successful career. The loss of career was mentioned by more than half of the women, given that they had a professional career, work experience or post-secondary education prior to arriving in Canada but very little of it was recognized by educational institutions and employers. Several of the participants became emotional, similar to the women who experienced war in their country, as they spoke about what they left behind. Bonita who arrived from Peru ten years ago with her husband and two boys indicated that she left

everything behind – her family, friends, the country she loved - and an excellent career. Her sense of loss increased as she has not been able to access employment in a professional field similar to that she previously held before arriving in Canada. While for Santia who fled Iraq five days prior to the outbreak of war, she was uncertain for several months about the safety of her extended family that she left behind.

Canada was cold when I came but it was a safe country.

That is a very important thing. We left Iraq five days before war started. It was very hard when we came here because we didn't know anything about Canada and when we came it was very hard because the war had started in Iraq and I didn't know anything about them, my family. After six months we spoke to our family and they were okay.

Because the war had started it was a very hard time for us when we came to Canada.

For her and other women an expression of a great sense of loss appeared frequently in their stories.

This journey to Canada for some participants was not a straight one as twelve of the twenty-five interviewed indicated that they had not traveled a direct route from their country of origin to Canada. Hanan traveled from Jordan to Palestine then on to Saudi Arabia prior to arriving in Canada. Others spoke about traveling to two or three different countries prior to arriving at the Buffalo boarder. Their experience at the Buffalo border was a journey in and of itself. Camilla left Columbia then traveled to

Germany then had to wait at the border for two months prior to being permitted entry into Canada as she describes:

I had to wait at the border. Buffalo border because I came as a refugee claimant so I did not have a visa for Canada so I had to wait for an appointment with Immigration Canada. So it was a long wait because of the problem with Iraq I believe and it was just overcrowded. There are volunteers at the border and they are very good people. They have like a trailer and they have cookies, coffee, water, computers, toys for kids, everything to help you out. But at that time, they didn't have any, like I said it was overcrowded and they didn't have shelters. Then I crossed through Bridgeport to Ft. Erie and then I did not know where to go so I met some people who were also at the border and they said they knew people in Toronto, so I went there for four days then came to Kitchener. It was really hard in those days, I could not find a home to stay. Where was I going to stay? Where was I going to go? I didn't have any money. I spent my money those few months at the border.

It is significant to discuss and pay attention to this journey, what it means for a newcomer woman and its impact on this notion of loss. The participants described feeling vulnerable upon arrival, experiencing great loss, feeling tired and worn from

their journey. These are all elements that pieced together help to create the immigrant woman's immediate reality and place it in a context that needs to be appreciated. These experiences and events are then 'carried' with them as they interact with service providers. It is then necessary to realize how this feeling of vulnerability impacts their everyday reality such as accessing and interacting with agencies and social service organizations.

### *Accessing Agencies*

An understanding of how women who are new to Canada learn about and access social service agencies and how they maneuver their way through the system were issues that were part of the original research focus. For many Canadians who speak one of the official languages, accessing an agency can be a challenge. Without proficiency in English or French and a good knowledge of the system, it can be a very frightening experience.

Almost all of the participants interviewed indicated that they had received an information package from the Government of Canada which included the *Welcome to Canada* guidebook and pamphlets when they arrived either at Pearson International Airport or at one of the Canadian/United States borders. The only participants who indicated that they had not received this information were those who had been sponsored by their spouse.

Informal supports such as friends and members of their respective communities were identified as playing key roles in introducing them to agencies and services. While

information from such informal agents can be helpful, they can also be damaging. An example, from my field practice, was a conversation I had with a pregnant woman who had arrived as a refugee from South America. She was frightened because she had been told by friends that when she gives birth to her baby, if her refugee claim is rejected, she will be returned to her country, while the baby will be kept here in Canada. This type of shared 'misinformation' highlights the need for the dissemination of correct information to this population.

Once accurate information about the services available is obtained, making their way through the social service system was identified as the next challenge. It was repeatedly expressed that it was difficult to understand which agency was responsible for what service provision and what the necessary requirements were to access the service, such as applying for government assistance, child care assistance, food distribution and more. This left many of the participants feeling frustrated. Sara, a mother of three school aged children, from Palestine claiming refugee status discusses her difficulties, in finding the service her and her family needed:

It was hard to access services. They need to make it [the system] more clear. We were refugees but we also needed help with settlement. It was too complicated and not clear and we were not aware that there was an immigrant services to address those needs we had.

Mindi, who has a PhD in the sciences is from Kashmir, came to Canada with her husband and speaks about the challenges and difficulties of obtaining accurate information and understanding how to know which agency to access:

What was difficult was dealing with the bureaucracy. It was incredibly challenging. It took things a long time to get things done. I had to find my way around to do things. It's just the steps involved were way too cumbersome at times. You know what I noticed and it could just be my personal experience. But someone would say this is the office you need to call or person you need to speak with and then they would say 'No, no, this is the wrong place, the person you need to speak with is...' And that person would say 'No, this is not the place...' There was a lot of confusion. I speak English very well [but for women who do not] I think it would be a real nightmare because most of the people who go through the social services agencies, the new immigrant women especially, ones without male support, they have no language capabilities, thirdly they have no familiarity with the environment and the services available to them. And many things that are taken for granted in their society are not necessarily available here. For them, it is truly a nightmare. If there isn't a social

service agency or guide or helper to help them through this process laying out the steps that people have to follow, it would be a very difficult situation for them.

The timing of when an immigrant woman accessed service was not consistent in the group as some participants did not access services until after a number of years of living in Canada whereas other participants indicated that they had utilized services within twenty-four hours to a few days of their arrival in the country. This usually depended on the immigration status of the woman. If she arrived as a refugee claimant she would have immediate access to different social service agencies and organizations that support refugee claimants upon arrival to Canada. For those participants who were sponsored by their husbands, fiancés or family members (in this sample it was sons or brothers), of which there were nine in my sample, some did not contact or interact with a social service agencies for several years. Ramla, a divorced mother of one from Somalia was sponsored to come to Canada by her husband but did not have contact with any social service agencies until her divorce some eight years later.

What this highlights is that the number of years in the country is not an accurate indicator of a woman's ability to access services. Those participants in this study who arrived in Canada alone – without a husband or partner - used the services almost immediately. In this sample, women who arrived with a husband did not make use of services immediately but did so some years later. Of the three participants who had married Canadians two of the marriages ended in divorce. This led to their first interactions with social service agencies some five to eight years after their arrival in



Canada. Despite being in Canada for that length of time, these two women still described their ability to understand and access relevant services as being difficult and challenging. Ramla describes it as follows:

My husband was working full-time so basically we didn't need anything. I needed stuff when I got divorced from my ex-husband. That was when everything was new to me. I couldn't find anything that I needed because I didn't know anything about the ....service. That was the first time. I didn't know the rights I had and whether I was eligible. I didn't have any help whatsoever for the first five years.

### *Agencies Identified*

The interviews indicated that newcomer women access a broad range of agencies depending on their needs and that these agencies present different types of experiences for the user. As previously indicated, the purpose of this study was to examine the interactions that the participants had with non-profit and government organizations that provided a service to the community. In this regard, I took the time to ask each participant what services they used and when necessary gave them examples. In responding to this section of the interview guide, the participants identified a variety of agencies and services of which they made use. They included ESL schools, counselling agencies, employment services, immigrant and refugee serving agencies, agencies that engage in food distribution, faith-based community organizations,

grassroots organizations, faith-based agencies, mental health and community health agencies, libraries, community centres and municipal offices.

When asked for a positive then a negative experience, I consistently heard a range of agencies that fell within both categories. If a participant related a negative experience about a particular agency or type of agency, a different interviewee would relate a positive experience about a similar type of agency. This created an image of a cross section of agencies that are perceived as providing as many different qualities of service as there are agencies. In this wide spectrum, the participants encountered an equally varied type of service deliverer. This included frontline workers, outreach workers, settlement counsellors, case workers, community workers, social workers, receptionists and volunteers. Within a number of agencies the experience altered depending on the service provider, therefore, a user could find themselves with both types of experiences at the same agency. Sophie, a single woman who arrived in Canada from China as a skilled worker with her PhD in Microbiology spoke about how she did not receive good service from an employment counsellor but returned a few months later to the same agency and enjoyed a more pleasant experience with another counsellor.

With respect to immigrant-serving agencies the challenge a woman experiences can come from an immigrant worker and sometimes from someone from their own country of origin. Claudia, from Mexico recounts an encounter she had at an agency that specifically served new immigrants:

I went to an agency for help and I went to a worker who spoke my language but who was from a neighbouring country. She said to me, 'Oh, back home you people and your government kicked out our government officials.'

From then on she was not nice to me. I had to go to another worker who did not speak my language, who came from another country but who was nice and able to help me.

This echoes comments from other participants as well. In describing her experience with an immigrant serving agency Bonita, from Peru indicates:

Because I didn't speak English, I went and so I say 'Please, I don't speak English well, could you help me?' She [the worker] grabbed my paper. I was shocked. How she could do this? She was rude to me. She treat me like I was garbage. I was a newcomer. She said that I need to talk to a Spanish person. She come from a country close to my own but she looked at me like I was low. She looked down at me. It was the expression on her face. They know you are a professional and maybe, I don't know, she doesn't like it. She want me to know my place here.

In this instance, the worker and the service user came from countries that were in political strife with each other. This conflict carried over into the Canadian context and into the service delivered by this worker whose attitude towards the user was influenced

and shaped by political tension that had occurred in the past. This finding helps us to reexamine a popular notion that service providers who share a common language, ethnicity, race or cultural background as the user may be in a better position to help them than a Canadian service provider. Despite similarities in ethnic origin and language, women from the same country may have differences that arise in their country of origin and are carried over to and have an impact on new situations in Canada (Ng, 1992).

What is being suggested by the data from the interviews is that appropriate or good service for newcomer women is available at agencies that have a mandate to serve a broad spectrum of the population in addition to agencies that specialize in serving immigrants. Ethnocultural specific agencies did not appear with more frequency in the discourse of 'good' service experiences. Of the 25 respondents, nine noted that they had a 'poor' interaction at an immigrant serving agency. Agencies with mandates to serve a broader population such as neighbourhoods, individuals and families with low socioeconomic status, the unemployed and families with children under six years old, were reported to provide a 'good' quality of service to newcomer women.

### *Encounters with Social Service Agencies*

Two significant questions focused on the women's experiences of their encounters with social service agencies. Each question was posed to learn the different facets of the interaction of a good service and a poor service. Each participant was encouraged to share at least one example of each type of service. The responses to each

of the two questions are further broken down and presented in three sections: the experience, feelings and impact on behaviour.

### *What Characterizes a 'Good' Service Encounter*

What is notable from this study is that about a fifth of the sample indicated that they only had what they describe as a good experience when interacting with a social service agency. For the other women, these positive experiences were easily recollected and they told stories of how these encounters made them feel. In this section I will recount some of these experiences, what made them 'good', the attributes that emerged from these experiences, how they felt as service users and how it impacted them.

### *Experiences of a Good Service*

The first question was simply to explore what made a service a good one in the eyes of an immigrant woman. The stories that were shared included descriptions of the experience itself, what the service provider did and how they felt. This is nicely summarized by Sara, the mother from Palestine, as she describes her meeting with an employment counsellor:

I visited Alice at [the agency]. I received help for my resume. I got the help I wanted because she was able to match up my work and educational experience with my need for employment. She heard about a job and thought about me right away. The service was good as Alice gave me good help, guidance, support and confidence. Alice was

polite to me and smiled at me. It made me feel welcomed and confident. She treated me like I was all the same, as an equal. I would not hesitate to refer Alice to any of my friends and I did.

In describing her ESL teachers, Shamar of Egypt, said they were friendly, accepting, understanding and very supportive.

In understanding these stories, I noticed that they were describing non-verbal cues by the words that they repeatedly used. The words they used to describe this supportive service were: smiling, nodding, listening and descriptions about facial expressions. Srwa, spoke about her meeting with a social worker who was reviewing her professional credentials. She said:

When I came, I knew that it would be a short period of time that I would need assistance; I knew that I would be able to work in the future. When I talked about my education background, the social worker would nod and say 'Oh, wow! You have that degree,' and 'Oh, wow!' She said that I am going to find a job because of my educational background. I was going to be able to find work. That was the thing that made me feel good, feel okay, feel valued...because of my educational background.

Srwa said that she felt very supported by the worker's comments as someone had finally recognized and acknowledged her credentials and she felt validated as an individual.

In this research, the participants' responses indicated that they were aware of and had a heightened sense of the non-verbal behaviour of the service provider. The women commented that they noticed the smiles, the nodding of the head, the service user's presence while they worked together. The participants found the service to be good if the worker conveyed the sense that they were being supportive, polite, caring, kind, trusting, understanding, respectful and appeared to be listening. These emotional attributes conveyed to them meaning as to how they were to be treated as a service user, their position in the Canadian context and as individuals. If the research participants used the phrase 'she or he smiled at me' this suggested to them that they were being heard, accepted and they felt engaged with the worker. Camilla, from Columbia stated:

The first worker I had, she was a blessing, my goodness what a woman! She had soul. She had that care about people. She was not just a person behind a desk looking at a computer screen, she would see through your needs and she was able to recognize [what you needed]. She was a great person. At that point I knew I could count on someone.

The supportive nonverbal cues that participants identified are significant in that one could imagine that if the main language spoken in a country is not their mother tongue then the individual would rely heavily on and pay more attention to those cues such as facial expressions and tone of voice in order to help interpret what is being said.

Frequently reported in the women's stories were descriptions of the manner in which service providers communicated with the service user. The interviewees paid attention to how the provider spoke with them including their tone, pitch, volume, speed and manner, as can be seen by the following quotations by different women:

They talked to me like they would talk to any other person.

He talked to me, he talked to me differently. He spoke to me like a person. He treated me like a person.

She smiled at me and she had a happy face.

Her words were simple and she speak slow with me. She wait to see if I uh...understand.

These quotations highlighted for me how newcomer women experienced a strong sense of belonging, respect as a human and their position by the manner in which the service user communicated with them. Mandeep, a mother of three from Saudi Arabia, recounted that when she visited a regional service agency, the service provider heard her speak English then proceeded to 'assess' Mandeep's language skills and then 'adjusted her level' of speech in order to ensure that the communication between them was effective and that she would be understood. Mandeep felt strongly about this supportive, positive experience commenting that adjusting the level conveyed to her that it was important to the worker that, she as a client, understood what was being said.

Other experiences shared in the interviews highlighted attributes that could best be described as being practical and pragmatic in nature. They were attributes that helped to shape a positive, supportive experience. The words they used to articulate this were:



guidance, being helpful, well trained staff, effective referrals, providing opportunities and giving options. Hanan, a social service worker herself who practiced in Saudi Arabia but unable to find work in Canada, describes the help she received from an immigrant serving agency when the manager gave her temporary employment:

She [the manager] gave me that opportunity to...she gave me options. I visited many times. I express my interest to her many times. I want to be there [in the office] doing anything because this is my job. This is what I really want to do. She understood me and gave me an opportunity. She said that she saw the sparkle in me. She said to me, 'You can do it.' Finally, I am in the thing I want to do. You know, even back home, this kind of position is not for everyone. It is for rich people and people whose parents are in the government. Because my dad had a business I worked with him. [But] I love this because I love the social work.

The participants indicated that they were able to benefit from service delivery providers who gave practical help. This is evident in a few experiences that were noted as negative even though the worker was nice to them but was not able to be of practical help. As she used the services of one agency to search for jobs, Shamar a mid-wife from Egypt explains:

The first job that I got in my field, because I did not want to be stuck in a factory, that advertisement I saw at [another agency]. That is where [this particular agency] was lacking I feel, because they were not updating, at that point.

Support and understanding are there but more progress about giving us information and that involvement. That was obviously lacking because I felt the need to go elsewhere, where they use to regularly update theirs, you know and every day they use to post up jobs.

This indicates that a combination of these attributes, such as a service provider who displays kindness and attending behaviour but is also able to provide concrete and practical assistance, is required to help make the experience a positive one for the service users. For Shamar and other respondents, this included job referrals, help with resume writing and other employment related tasks. It appears that for the immigrant women in this research study, practical help delivered in a personable manner was the ideal situation for a good experience.

#### *Feelings and Reactions to a 'Good' Service Encounter*

When the participant felt that the service they had received was a good experience, they expressed feelings that were also positive in nature. The feelings that were described were: hope, confidence and happiness. A recurring theme that emerged was feeling welcomed and that they belonged as the following quotes about their reactions to these positive experiences highlight:

It made me feel welcomed and confident.

That good experience with the counselor encouraged me to stay in Canada.

For others, they felt that they could depend on someone to help them when they required it. Maria, a landed immigrant from Guatemala and mother of three young children describes how she felt after meeting with a social worker:

That made me fill with hope. I started feeling. Oh, that is not that bad you know, there are ways to do things. I could...uhhmmm...find ways to find a better life, find ways to, how to put it...at that point I knew could rely on people. She would say, 'Call me. Leave a message if you need anything,' and it was really good. She was really good.

In light of their feelings of vulnerability, a sense of welcome and belonging was significant for them as these feelings are an inherent desire for most people especially for those settling into a new country. Yosha, a social worker with a graduate degree from India referred to this sense of belonging in her interview:

A sense of belonging is what is hindered when you come here as a new Canadian and these little mannerisms, that you don't understand they make you feel that you are not belonging somewhere. It is always a concern of not belonging somewhere; it is part of your identity. It is a bit

of an identity crisis when you immigrate. Immigration is like new birth. You have to restart. All this identity that you related with suddenly is in flux because so many new things are coming in you've got to let go of certain things because certain things don't work in this country.

In addition to feeling a sense of belonging, the information from the interviews indicated that the women felt valued and respected with each positive encounter. This was evident in their stories where they indicated that they felt that the service provider treated them as an equal. In light of the power that such positions hold this is a noteworthy comment. Examples of some of those statements are below:

They talked to me like they would talk to any other person.

We didn't feel we were looked down at. He was respectful [to me].

That was the thing that made us feel good, feel okay, feel valued.

Communicating a sense of value is significant for this vulnerable population as research has shown that newcomer women's interactions with the broader society is riddled with racism, sexism, discrimination and systemic barriers that work together to devalue their social position in Canada (Dossa, 1999; Elabor-Idemudia, 1999; Mojab, 1999). Maria commented that with a good service she felt believed, encouraged and safe. She said that she often got the message from many persons that she was not good enough to obtain employment in Canada but with one employment counsellor who was not

patronizing to her, she felt optimistic that she would be able to find work. Conveying the sense that these newcomer women were valued by the service providers had a significant impact on how they felt about themselves and their social positions in Canada.

### *The Impact on Future Behaviour of Service Users*

One of the objectives of this study was to look at the impact of the participants' encounters on their future behaviour as I wanted to investigate how a good service influenced them. From their discourse, I was able to determine that these experiences instilled a feeling of hope, boosted confidence and increased self-esteem. As well, users of a 'good' service indicated that they would use the service again and did refer other family, friends and community members to use that particular service.

In recounting their respective stories of a positive encounter the following quotes point out some of the impact that occurred. Sara in discussing her meeting with an employment counsellor, previously mentioned:

I would not hesitate to refer Alice to any of my friends, and  
I did.

Other brief comments that reflected this sense of hope and confidence were:

I feel like I could make it now.

The options she gave me helped me to feel good about  
myself.

A lot of people looked down at me but she smiled and laughed with me. I had belief and felt encouraged, so I know I could make it here in Canada.

Given the textured nature of their experience prior to arriving in Canada including the journey itself, any encounter that would offset feelings of vulnerability, lack of belonging and being devalued would impact positively on their self image. They reported feeling more energized, more hopeful of their lives here in Canada, and believing in themselves. This fueled them to continue to pursue through challenges such as seeking suitable employment. Shamar, from Egypt describes how having repeated positive experiences helped her and her family to remain in Canada despite facing a number of challenges:

I had depression. I didn't know where to go. It was terrible. Everything was new and it was a difficult experience. I felt that the government threw us into the country then said, 'Good-bye and good luck,' then just left us. I felt there was zero support, zero support. We came as skilled workers and after a few months we spent every penny we had while we looked for work. I asked 'Why are we here?' I thought many, many times to go back. But I had many, many, many good experiences. Let me tell you, without these good experiences, I wouldn't still be here. We would have gone back to our country. I would have realized that there was no

hope, no reason for being here. They [the service providers] were understanding, professional and it was how they supported me. They showed respect and they listened to me. Now, I am here.

These feelings encouraged them and gave them the confidence to return to the respective agency to gain further support and service, to follow up with referrals and to seek out other agency services in the community. It is often self-evident that the delivery of a service in a positive manner is beneficial for the user. What the findings show in this study is that there are a number of effects of a good service on newcomer women that are beneficial. I found it interesting that in some instances the impact on future behavior was as straightforward as returning to use the service again, to more substantial such as choosing not to return to their country of origin but to remain in Canada.

#### *What Characterizes A 'Poor' Service Encounter*

Following the previous question, the participants were asked to talk about a poor service. As with the question concerning a good service, the three areas that will be discussed are the experiences themselves, the feelings that were generated as a result of the encounter then the impact it had on their behavior.

#### *Experiences of Poor Service*

The stories that were told in response to this question contained different details that could be grouped as nonverbal behaviour, modes of communication and conduct

similar to the categorization of themes in the responses of the previous question.

Descriptions of the experiences often included their reaction to the nonverbal communication of the service providers. This included their facial expression and body language such as a lack of eye contact. Bonita, who has lived in Canada for ten years said:

When I went to see her [the service provider], she just looked at me like this, up and down (making a frowning, scornful expression with hands crossed), as if I was nothing.

In commenting on her experience, Swra said, “The expression on their face, auggghhh!” For Ramla, it was when she went to see a caseworker for the first time. She smiled and made a light joke with the worker, in an attempt to ‘break the ice’ but she reports that the worker looked at her and did not smile or say ‘hello.’ Whereas Anna noted:

They judge my appearance, because I wore a hijab, and they aren’t sure if I know how to speak English.

The information that service providers communicated through their body language and expressions was interpreted by the participants as that they were unworthy. When an attempt is being made to engage with another person and the attempt is not acknowledged, it serves to maintain the distance between service provider and service user. It is apparent from the interviews that the participants in this study



were very much in tune with the messages sent to them by the service providers through their nonverbal cues.

Poor communication style was a significant feature in the negative interaction among service users. Participants were clear in articulating that it was the manner in which they were spoken to that was a cause of concern for them. What I heard from the women was that the language barrier was not exclusively a result of their lack of English proficiency but also due to the service providers' poor communication style. The following are brief portions of how the participants described this communication:

She told me this in a rude way. It was the way she spoke to me.

...the receptionist, they use big words which I couldn't follow or they are like too abrupt.

It was the way she talked to me....I smiled with a sense of humour and she didn't even smile or say anything.

She talked fast, fast, fast. I did not know what she was saying to me.

The examples that were provided by the women referred not to the ability or inability to speak the English language but how the words were delivered. This included the manner, tone, pitch, speed as well as the accompanying facial expression and body language. They described the manner that they were spoken to as being abrupt and rushed. The service providers appeared to be impatient and wanted to get through their interaction with the user as quickly as possible.

Fatimah, an unemployed 35 year old from Pakistan with a Masters degree in Marine Biology related the poor communication she experienced when she had to make a follow-up appointment for a test at an agency. Fatimah recounts:

I went for the test and I was not aware of the accent of the Canadian. The lady who was there she asked me the question in typical Canadian accent and I couldn't ... she was talking in slang and I couldn't understand what she was saying. She wants to book my test but I couldn't understand what she really means. She said, 'You wanna book? You wanna book?' I thought, 'Oh, my God, is she talking about any kind of a book?!? She didn't explain that.

The outcome of this interaction was that Fatimah left frustrated and went home to her husband who explained to her the way in which the word 'book' is sometimes used in Canada to refer to an appointment. Fatimah's response was that the worker, once seeing that she did not understand could have chosen another word to use rather than repeat the same and obviously ineffective phrase three times. Other participants noted that the communication style was patronizing as the worker often did not adjust how they spoke, used big words and gave mixed messages. In this poor exchange of communication, the receiver who asks for clarification may increase the intensity of the negative experience. Fatimah continues her story:

I ask her, 'Could you repeat?' Her attitude was not good. She said, 'Okay you can go, if you have someone else who

can understand better than you, you can bring them.' I said,  
 'I can understand English. If you explain, I will understand  
 it.' She was not patient.

The poor communication that newcomer women experienced with the service providers was compounded with the differential treatment they witnessed.

Sara, the 36 year old wife and mother from Palestine, described an experience with a community worker in her area who was working with different residents. "I watched how the way the worker talked to the Canadians and it was different." This differential treatment was noted by other participants as well, in different scenarios, who commented that some service providers talked differently to Canadians varying their speech and being more accommodating. Whereas towards newcomer women they spoke in uncomfortably and embarrassingly loud voices, did not repeat themselves and questioned newcomer women suspiciously.

Mandeep, the young mother from Saudi Arabia who was sponsored by her husband, noted with wisdom that in attempting to explain that Canadian workers will take the time to explain things to Canadian service users:

So when you talk to Canadians you come to their level.  
 You get respect and they [the service provider] wants the  
 opposite person to understand them. They want the  
 message to be conveyed.

For Mandeep this reinforced for her that she was being discriminated against as she could see the worker making attempts to adjust her communication for other service

users. This differential treatment displayed to her is an example of some of the discriminatory practices that occur.

Hanan a Muslim woman who wears a hijab said that she had witnessed this difference in treatment but felt it even more poignantly when a friend of hers who is a Muslim as well and wears a hijab received a different type of treatment from the same agency. Hanan described it as being more polite and nice. The difference Hanan pointed out was that her friend is a Canadian who is white and speaks English.

Ramla a divorced Sudanese single mother of one, who is fluent in four languages including English and French and speaks with a British accent, described a day when she had to visit an agency and was having what she called a 'bad hair day' so she put on a head scarf which she normally does not wear. In describing how this new worker treated her she said:

It was the way she talked to me. The first time I went there,  
I was going through the divorce, like I said, so I had a  
horrible bad hair day and I wore a scarf and I wore it  
backward and the minute I sat in front of her I smiled to  
her and she didn't even smile back or say anything. She  
was sitting not even two feet away from me and she was so  
loud and three times I told her 'every single word you said,  
I understood you, you don't have to be loud.' She was loud  
and slow. I said to myself, it is because you are wearing a

head scarf and you're Black, you are clueless and don't speak English.

Several of the women felt that their English was adequate enough to convey their feelings, but also sensed that the service provider was either impatient with their accent or frustrated with trying to understand what they were attempting to say. It made them feel that since they spoke with an accent their English was not adequate. Hanan recounts a conversation that she had with a service provider who was having some difficulty understanding her while she tried to explain to the employment counsellor the job she held back in Jordan:

In preparing the resume, that lady, she had a hard time understanding the position I was doing back home in Jordan. She just looked at me. I explained it to her but she was like 'Okay (sarcastically) maybe then' Like you try to talk to people. It is English, maybe not the same words but with an accent and when you talk it's like they look at you and go 'Uhhmm?' They look at you like 'What, you weird person?' I speak words. It's like come on you hear me right? I just speak with an accent and sometimes not all the words are right so I say 'get' instead of 'got'. I still speak English.

The behaviour of the service provider was very prominent in the women's discourse. The behaviours were described as being rude, harsh, humiliating, punitive,

offensive and abrupt. One moving example of this was Srwa's story, a single mother of two boys and a girl, from Iran who upon arriving in Canada around Christmas time was told that they could get toys and other treats for the holiday season from an agency in the community. At that agency, with her children, she had to produce a form of identification in order to obtain the package of items. Srwa recounts what occurred:

They asked for proof and when I gave them my proof and when they saw my last name, they started laughing. The one worker started laughing so hard and she yelled, 'Sue come, come' to her friends [co-workers], three of them and said, 'Look at that name' and all of them [stood there and] started laughing in front of my children.

Another unfortunate situation occurred for Shamar, a Muslim woman who wears a hijab:

Let me tell you, it was when I was at [this particular organization]. The treatment was terrible, terrible, terrible. I will tell you about it. I felt that I had no say of what was going on. The worker said the F-word to me. She said to me 'I know you guys. I know how you act out. You guys are so dramatic.' I know the exact words. I went, I complained. I went to get help but they told me that there's nothing you can do because she didn't cause me harm. I felt my rights were violated and I needed to take action so I

complained and looked for help. I didn't know what the action was to take but I had to take an action. The worker apologized, but it was not enough. I begged her, I told her 'Please, when people are vulnerable you need to be so kind. Please I'm helpless. Please don't talk to me this way.' But she never listened so (shrugging her shoulders)... The supervisor, I called him and he called back. He said the worker admitted it and never denied it. He asked me on the phone, 'She apologized didn't she?' I said that my concern now is that I don't want her to do the same with other immigrant women or other newcomer people from different races, cultures. It was like no big deal for him. This was the message I got from him.

This humiliating incident is an example of an abuse of power by the service provider whose behaviour was unprofessional and offensive. Unfortunately, it appears that the supervisor's response to Shamar's complaint was not supportive. This brings to light the often systemic nature of the barriers that immigrant women face in their interactions with social service providers.

There appears to be differences in how newcomers are treated based on their immigration status. Being a spouse of a student, Joy from Kenya noted the attitude towards her as expressed by an employment counsellor:

You are not refugees, so you have to take care of your  
own problems, your own needs.

This difference was echoed by women who were married to Canadian men and newcomer women who spoke a high level of English. Eight of the participants had learned English in their country of origin and were quite fluent but they insisted that even though their English skills were excellent they still did not have an understanding of the Canadian system and how it worked. This was the situation that Camila of Columbia faced when she came to Canada. She went to apply for a service and asked for help; however, she was told that her English skills were good enough to be able to do it herself so they handed her some forms to complete on her own. Though her English skills were excellent, she had only been in the country for a few months and did not know how to maneuver her way through the various systems.

#### *Feelings and Reactions to a 'Poor' Service Encounter*

Each participant who shared an experience they found to be negative also spoke about the unpleasant feelings it produced. The underlying messages transmitted to them were that they were not worthy of the same treatment as that given to a Canadian. They described feeling depressed, angry, disappointed, frustrated and 'not good enough'. A summary of the participants' expressions demonstrate the consistency of the feelings experienced:

It was humiliating and harsh.

I didn't feel good.

It was really, really hard.



It's depressing. It's killing me.

I felt disgusted.

I was very, very upset.

I felt like mistreated.

I felt like they didn't care.

Suddenly you feel you're not adequate.

As a recent refugee from Syria, Tamina demonstrates how she felt after her interaction with a worker:

I speak good English so when I went to the place they ask me 'How can I help you?' This question is normal here but it is not normal for me because I know instead 'Hi, how are you?' It's really hard. This lady talked really fast, fast, fast. I speak English but not like a 100% because I am still a newcomer. So I ask her to please repeat. She say 'Okay, you have to bring in an interpreter.' I say to her 'I speak English but I can't get everything when you speak very fast. Can you repeat?' She was very frustrated with me. I felt so bad. I felt like I'm that much lower. I'm nothing, and I have knowledge and the education. I'm an educated person. I'm not a person who doesn't have nothing. It's really hard on you when you make the effort to go and ask for help to someone who doesn't understand you.

Mandeep described her reaction to being spoken to loudly by a service worker:

She [the worker] was not trained very well. She talked to me either too high or too low. It made me feel like okay even if I don't know the language uhh I'm not dumb or I know I have to wait here [in the line]. Listen, I might not be fluent in English but I am not deaf. That is very humiliating. The (unwanted) attention that you get is humiliating. When I don't dress up they look at me like I'm straight from the boat but if I'm dressed up they will treat me with respect.

Other words and phrases that were used to describe their feelings were that they did not feel as though they belonged and were being ignored, therefore, they felt stressed, lonely, embarrassed, ashamed, isolated and angry.

Continuing Srwa's account of when she and her children went to pick up the package at Christmas time and they were laughed at, she commented on her feelings and reactions:

You can't...I never forgot the look on my children's face. My children and me. I was too embarrassed and I was saying that we are all going to suffer because of that last name. And when I found out that the name was funny, I couldn't change it because it takes a year to do it and it cost a lot of money. I did find the money to change it, however.

I felt, oh! Ashamed. Do you think they [the children] enjoyed the toys? Do you think I enjoyed the toys? From then....it was too shameful, too painful. Painful for me. Shame for my children.

As previously discussed, women immigrating to Canada have experienced different forms of loss and gone through different types of journeys; all of which contribute to their feelings of vulnerability upon their arrival to Canada. Camila summarized this notion of vulnerability eloquently by saying:

[I felt] really bad, I felt like mistreated. I felt like they didn't care. You know, you are very vulnerable when you come. I didn't feel that I could say anything because when you come to Canada I think I was in a stage of my life that you lose so much, you leave so much behind that you felt that people could walk all over you, like your self-esteem is very much polluted. I think at that moment that if they [a service provider] would say, 'You know what, you have to crawl on the floor,' maybe I thought I would have to.

As this particular theme emerged, I explored it further by adding the following prompt: "Did you say anything when you were treated or spoken to in that way?" What became apparent from their responses was that they felt a fear that silenced them. Camila responded by saying:

I know how to speak, but what do I say? I didn't feel that I could say anything. At that moment, I didn't realize that much 'cause I didn't know how it was suppose to be.

This was a sentiment that was shared by other participants.

The inability to respond to or challenge this perceived unfair treatment was often due to fear - fear of repercussion, reprisal or removal of services. This is a reflection of the power imbalance that can occur between service providers and service users. This fear was also evident for me as a researcher as some key informants in the community who were helping recruit participants for this study indicated that some women wanted to participate but were fearful that what they revealed to me would jeopardize their social assistance benefits or other services that they received. This reaction could be a result of their cultural knowledge of and experience with abuse of power by those providing services in their country of origin. This theme of being silenced can also be found in the following comment by Sara:

She told me this in a rude way. It was the way she spoke to me. I said to myself 'Wow, why is she doing this to me?' It was humiliating and harsh, she didn't have to say it that way. I didn't know what to say. I was too shy to answer her, I was scared. I was also scared that if I said something then I don't know what would happen.

Combining this notion of fear with the perceived differential treatment of newcomers and Canadians, Sara notes:

I watched how the way she [the worker] talked to the Canadians and it was different, because in the room was Canadian and multicultural people. When she was talking to us, the non-Canadians, her voice was loud but for the Canadians it was lower. [She] is probably saying [to herself] that she [Sara] doesn't know her rights but the Canadians, they know their rights. It is as if we do not know our rights.

It was evident from the participants' response that they felt they were not being treated as equals because they might not have been aware of their rights as service users. In exploring this idea further, Hanan brought to light a very interesting piece to this issue of newcomers knowing their rights. In describing how she feels now compared to when the incident occurred she stated, "Before, I don't know, I feel sad. Now, I feel mad." For some of the participants, living in Canada for several years, working in different fields, including public and non-profit social service organizations, has 'taught' them what their rights are. The question was then asked: "If that situation occurred now, how would you handle it?" Almost all said that they would have confronted the person addressing their behaviour and requested to speak to a supervisor. It does shed some light on this issue of not knowing one's rights and that it is an evolving process which hopefully improves as one remains in the country longer.

### *The Impact on Future Behaviour of Service Users*

It is necessary to note at this time that when asked to recount a negative experience, four of the women were very resolute that they had never had a poor experience with any of the non-profit agencies or social services whereas others had difficulty recalling such an experience. While it was expected that there would be some participants who would not have a good or a poor experience to share, it came as a surprise at how resolute and steadfast some were in their responses.

In stepping back and looking at this reaction to the question, I speculated two possibilities. First, they truly had never had a poor or negative interaction with a social service agency. The second possibility is associated with the demographic question that was at the beginning of the interview: *"How did you find the Canadian people when you came?"* I noticed that the same respondents who indicated they did not have a poor experience were equally adamant about how nice and friendly Canadian people were. It appears that women who felt strongly about their initial experience in Canada had very little to say regarding a 'poor' experience.

This left me, as a researcher, a bit perplexed until I had a particular experience with one participant. She had responded in the fashion just described. Even after probing further, she remained absolute that all her encounters had been good. As we were in the middle of the interview and it was getting close to the time that she had to pick up her son from senior kindergarten at school, I stopped the tape and walked with her to the school which was close by. During the walk and while in the school yard waiting for the bell to ring we talked and she said to me, "Gillian, I don't like to talk

about negative things because it puts me in a sad frame of mind. It's not nice to always be thinking about bad things." Following this discussion, and after we picked up her son, we continued the interview and she was then able to provide me with several experiences that could be described as being poor. I kept this experience in mind as I continued with the remainder of the interviews. If a participant answered strongly to both questions of their perception of Canadian people and having a negative experience, I gently gave them permission to describe an experience while acknowledging that the individual may still be a nice person but their way of working was not at that particular time.

The most prominent impact that was found in this research as it related to a poor interaction with a non-profit agency or social service was that many of the participants reported that they would not go back to the agency or use their service anymore. Ramla, in describing her thoughts during her visit with an agency:

I was disgusted and very, very upset. I said to her that you can ask me anything you want but talk to me like a normal person. And then she continued to saying it again and again. So probably after the third or so time, I just grabbed my stuff and said 'I'll talk to you again when you treat me like a person.' Before I left, I told her 'I am here because I don't have any money. You make me feel like I'm not worthy. I feel the shame of even parking my car here and going inside and now you are talking to me like that. I'm

gone!’ See for women like me maybe if you [the worker] say ‘I will see you again’ I will say ‘uh-huh’ but you will never see my face again. But sometimes you have no choice so you either walk away or take whatever it is they are offering you.

Continuing from this idea of feeling unworthy and ashamed, she went on to say:

...it’s not what, you know, I planned for my life. This is not how I saw myself years ago. I felt so much shame. I was praying to God that none of my friends would see me at the agency. It was shameful.

This is an indication of the persistent feelings of shame and vulnerability that the women experience prior to going to an agency. It is then compounded with poor treatment which can have a profound effect on an individual. Continuing with Srwa’s experience at the agency distributing the packages at Christmas and its impact, she stated:

I still have...I can still picture her. Do you think we enjoyed the toys? Do you think my children enjoyed the toys? I would never go back and after that I never did. Even though right now, if I go by that building, I don’t want to go downstairs. I don’t want to take my kids to that building.

In asking her if she would refer anyone to that agency, she responded:

I would not refer anyone. To be laughed at?!?



Srwa now works with immigrant women and often does her outreach by accompanying newcomers to certain agencies. She said that she relives that experience each time she goes by the particular agency. Just like Srwa, other participants indicated that they would not return for service, hesitate to return or would not refer someone that they knew. The responses were consistent as noted by Camilla:

But when that happened, when I came back next week they told me okay we have to make an appointment with [an agency] to get you started. When they heard that I spoke English, I knew English well. So they tell me 'Okay, you speak English, so you can do it. Come (gesturing towards the telephone) and I did it all by myself. The whole pressure...they just told me that you have to call this and this and this and I called for legal aid, for social assistance, for everything, I did it all. The thing was that when I went there they said 'Okay you do it' and that was my first and last time, I never went back. Never. I said that if this is what I have to do then I can do it alone.

Joyce remembers her experience also with an employment counsellor but at an immigrant serving agency:

Because the woman who interviewed me, I don't know, she may know nothing about ethnic women, probably she doesn't experience, doesn't feel...she may live in an ivory

tower representing people who she has no idea or know nothing about. I don't think that they thought they would get anyone who is African. It was just this one agency but for me, every time I see that name or I see their pamphlets at another agency and every time I see that name jumps into my face and something negative goes through me.

### *The Nature of Social Service Agencies*

The deeper implications of a newcomer woman not returning for a service to which she is entitled to should be explored further. As a minority woman, it is disturbing to hear that the choices a newcomer woman has are to either walk away from a service she is entitled to or take what it is they are offering as it highlights the oppressive nature that institutions sometimes take on. At this time, there must be room to discuss the role of non-profit agencies, social service and government organizations, the power they possess and the impact they have on service users such as immigrant women. Agencies and organizations that provide a social service often are in possession of a unique product. In any region or area in the country, there is a limited number of employment agencies, food distribution centres and community centres, where one can obtain Ontario Works, bus tickets and other necessary programs. This being said, the services or goods being delivered can only be obtained or had at certain locations. This plays a significant role in how an immigrant woman perceives her experience since if there is no other place that she can obtain this service she may be left with an undesirable choice to make if she does not like the service she is receiving. An example

from this study is Seltana from Afghanistan who needed bus tickets and diapers which were available at her local community centre. She had such a negative experience with the supervisor of the centre that she refused to go back there for six years; this, while she lived across the street from the community centre. This particular community centre, like many others in the Region, is a distribution point for free bus tickets and diapers for residents in need. The implication of this is that this woman was without these items or had to go elsewhere, and in this instance walked farther with her young child in order to obtain these essentials.

With social service agencies having an almost monopolistic hold over many goods and services, it leaves a newcomer woman who has had a negative experience with an agency two options. One, to go elsewhere, which usually requires transportation and building back up that trust to interact with a new agency. Or two, as Ramla stated “you take whatever it is they are offering you.” The difficulty with this statement is that the option of ‘walking away’ entails being without some type of essential need or help while the option of ‘taking whatever it is they are offering you’ implies that this ‘it’ is a poor service. In an effort to maintain their dignity some women may choose to go without the items they require, the service they need or decide to go through significant inconvenience in order to meet their needs.

### *Suggestions for Enhanced Services for Newcomer Women*

This study provided a space for the participants to voice what they felt were areas that service deliverers could improve upon. The identified areas are improvement

in communication, behaviour/professional conduct, empathy and understanding, education and training and the dissemination of information. Sara, the first participant whom I interviewed for this research project provided the following suggestions which nicely summarizes many of the points that were also articulated by the other respondents:

People need to be more polite. Look at the women in their eyes and not look away. They [the service providers] don't look at you, they look away. I hate that. Be clear, do not use all the big words. When they use big words and I ask them to repeat it, they don't like to repeat themselves. When I ask them to, if they do, they will say it clear but with a rudeness. They need to be sensitive of immigrant women's experiences, fears. We are new. We are scared. We do not know much about the Canadian system and like me I have had bad experiences at the border. They need to not talk to us as if we are criminals, with all this suspicion. It is how they ask questions; like you are hiding something and they want to get it from you.

While most of the participants provided examples of how services could be improved, some did not have any ideas to share. It was interesting to note, that some women did not feel that they were in a position to tell workers how to do their job. Being cognizant of cultural influence on issues related to criticizing positions in power

but being mindful of the need to obtain what I felt would be valid data from these participants; I probed it in a more gentle way so that they could feel more comfortable and perhaps recognize their potential position of power within the system.

### *Communication*

As the subject of poor communication was raised repeatedly, the majority of the suggestions provided by the participants were on this topic. The areas of improvement that were identified were the use of the language, tone, how things are said and ensuring the message had been conveyed. The following quotes from different respondents are an indication of these reoccurring subjects:

Speak slowly.

Assess our language skills.

Be nice. Speak English.

Break down the language to simple words.

Explain what you mean.

A newcomer unable to speak English is often what many think about when they hear about linguistic problems as a barrier to accessing services as much of the focus on language barriers is on the proficiency in the dominant language. The suggestions made, however, indicate how this can be partially overcome by having service providers assess a woman's ability to speak English. The participants felt that within the initial conversation a worker should be able to judge or assess their language ability. There are times when the command of the language is strong, however it is the accent that is

making it hard for the worker to understand what is being said. If this assessment is being made, then one can avoid judging someone based on their accent. In other instances, if there is an issue of illiteracy, it is also possible that the woman may have low literacy levels in her mother tongue as well.

What was repeatedly suggested was for service providers to use simple words. A caution here is that when a request to speak in simple terms is made, the conversation style should not become condescending or patronizing. Using simpler words, talking slower and checking in with the service user periodically to ensure that they understand were also suggested as means of improving communication. Fatimah alludes to this when she says:

Be more patient and they can talk in a very simple way.

[They] should be more patient and explain what you mean.

Know that you are dealing with newcomers and talk to them in a simple way.

Many of the comments made were that it was the way they, as service users, were spoken to that was so upsetting. The message often conveyed to the women was that they were not to be trusted and that they lacked intelligence.

Ensuring that the information was clearly understood by the user of the service also plays a significant part in effective communication. In the data, it was noted several times that the participants got the sense that workers went out of their way to ensure that their Canadian counterparts were understanding what was being said, by way of adjusting pitch, tone, speed of speech and the effective use of language. For newcomers,

these are the exact same skills they indicated they required as users of service. Along with a brief assessment of the woman's language level and slowing down the interaction, it would greatly improve the communication. As Mandeep notes:

Talk to us [newcomer women] like you would talk to any other person. From their reply, they [the service provider] should be trained to be able to judge if this person speaks fluent English or not. Also, assessing the language. Assessing where they come from and break down the language to simple words.

### *Behaviour/Professional Conduct*

The study participants suggested simple and realistic adjustments in behaviour on the part of service providers. These suggestions include: being more polite, treating them with respect and not judging them based on appearance. Here Ramla makes this request of service providers:

Don't assume everybody is ignorant. Don't assume that everybody doesn't speak English. The minute you see them wearing different clothes or whatever, don't just assume that they can't read or write.

With respect to the professional conduct of service providers in social services, there are certain expectations and procedure that should guide their behaviour. Respect

for others and recognition of service users' basic rights are primary. Srwa provides this suggestion:

Respect people. Everybody is somebody before they come here. One of the biggest things that make people feel safe to come here is the social service programs because many of us do not have that back in our country. And once you make that a painful experience, people will have nothing left. No hope left. I don't know how to explain it. Don't look at them as criminals, don't put them down. People need something...how can I say...nobody likes to be in that position, sitting in front of a social worker, explaining what they do every day, asking for help, etc. Remember they [the women] don't like to be there. Not like they chose to be there.

This notion of conveying respect through work principles was echoed by Sophia, who now works as a social service provider herself, mentions it as a starting point:

First of all, respect their culture and their background.  
'Cause that's what makes each person distinct, kind of. It all starts from there. You've got to respect the person to start with, then you respect the person's work experience, education and background. With this kind of work, we see



different people all the time and you are so used to seeing so many different people, I wonder if we become indifferent with the newness of people and the different clients. Because you see so many newcomers and they all have very similar problems such as finding the very first professional work here in Canada. So, it could be that people become indifferent to the needs because there are so many people with the same requests.

Guiding and assisting are integral parts of what service providers seek to do when working with individuals. For newcomer women, it is essential that this is carried out with knowledge that the service user has the right to self determination. Hanan offers this suggestion for the improvement of services:

Be open-minded. Be understanding. Listen before you talk and don't think you know everything. You're helping the women to find her way. And ya so...find her way and let her do it at her pace. And she's gonna do it and she knows what she has to do.

Another participant, Yosha, felt that part of the role of the service provider should be to start where the service user is at and begin to enhance their self-esteem since that is fundamental prior to providing a service:

You know, before any kind of job search or any service that they give, target at, you know, enhancing the self-esteem of the woman coming in because everything starts here (points to heart) or here (points to head). Even a great big endeavor starts with an idea. So, for the new immigrant woman to succeed in this country, whatever service they are getting, start on the level of esteem building, confidence building. You know, start with appreciating them. Don't just be, you know, a Messiah kind of... you know. Listen to their experiences. They can teach you, you know, to make your systemic inequalities better. They come from highly dynamic societies – some are war stricken. That dynamism this country needs. You don't think that...it's...Canada needs immigrants but they also need to learn lots of things – values, culture in order to be truly multicultural.

Interwoven in the suggestions on professional conduct and behaviour of service providers were the need for more compassion and consideration of newcomer women and their experiences.

### *Empathy and Understanding*

Empathy and a need for further understanding were also raised as areas of improvement. Mindi put it well when she says:

If they [workers] could understand where other people are coming from and have some understanding, even if it is just a little bit of just the major things, it would change things.

The sensitivity that Mindi is referring to can be linked to a worker's greater understanding of several issues: a newcomer's journey to Canada, what their life was like prior to coming to Canada and the circumstances under which they left their country of origin. As Camila notes, "the workers need to be sensitive to the issues." She elaborates:

You [service providers] have to be more sensitive to the issues; to the issues that people bring when they come because most of the time you can think of let's say two countries and you think of refugees from those countries, they have issues but there is so much more to it. You need to know how people feel when they come. You don't have to know everything that they've been through but read and learn or educate yourself a little bit more. You learn from the experiences what the other [persons] go through. Think of this lady, she came and maybe she is feeling like this.

You have to put yourself into other people's situations.

This need for mindful compassion is further connected to the suggestion for workers to be open-minded about the newcomer woman that they are about to interact with. Part of this need for being open-minded is linked to further education.

### *Education and Training*

The women repeatedly commented that in order to improve empathy and understanding was the idea that the workers have to gain further knowledge and be open to learn. This includes learning about other cultures but does not require an expertise for that would be counterproductive as no ethno-cultural group is homogeneous. This type of learning has two components to it. First, a broad understanding of immigration, newcomers to Canada and various countries and cultures of the world. The second aspect required is a form of continuing education. It is learning from the client as Yosha notes:

Listen to their [immigrant women's] experiences. They can teach you.

In developing this broad understanding of immigrants, Mindi comments:

If the social service agencies want to truly get through to people, most of a lot of the eastern cultures have a lot of commonality when it comes to taboos, reservations and practices irrespective of their religion. These things are very common – honour is a big thing; keeping an individual's prestige no matter what the conditions. So, I think that sensitivity seems to be to me, a big need. If they could understand where other people are coming from and have some understanding, even if it is just a little bit of just the major things, it would change things. A woman went to

a clinic and was asked if she was sexually active. This is a very normal question here in North America but it was very offensive and a very big thing for a woman covered from head to toe and a strange man asking this question. She thought he was insulting her. The sensitivity to other people's way of doing things. People can fall and become victim of things because they don't know any better.

Though the comments were not specific to a particular training that staff should obtain, it was clear what the women would like to see as an outcome of any training that is provided to service providers and that is an increase in understanding of the issues that female newcomers to Canada face.

### *Dissemination of Information*

What has been repeatedly requested by the participants was 'someone who could lead them through the process' as it relates to which agencies to access and for what purpose as many of the participants felt that it was a struggle to understand the system. Some identified it as being part of their settlement process. Joyce conveys the importance of women gaining more knowledge by stating:

...like educating women, informing them. People know what to look for when they are informed about the existing services. So, I think it is more about disseminating more information and informing them.

For Mindi, she describes the practical need for such information:

I think everybody who comes here, as a newcomer, they need to have a booklet that has all the Regional services listed. But not just addresses and names and numbers but someone who could lead them through the process, you know, acculturating themselves to a new place. Finding things that can help them. That is the difficult part. Some don't know how to manage their living from day to day and know what is what. That is essential for them to understand. You [Canadian government] are inviting so many people to come in and then leaving them on their own and there are multiple issues involved. That support system doesn't exist. They are probably taxing their local community as well. It is not easy accommodating everybody. At the same time you want to make sure that the person can succeed in their life. Not just bringing somebody in and letting them fail.

### *Summary*

The findings of this study revealed that knowledge of a woman's journey to Canada is significant as it is part of their reality that they bring with them as they access services. Their perception of the quality of the service they received appears to be based

on the information conveyed through nonverbal behaviour, mode of communication and conduct. The feelings of hope, confidence and happiness that emerged from the positive experiences while anger, shame and humiliation resulting from the negative experiences and the impact they have on immigrant women are also noteworthy for social service practitioners. The suggestions for improvement in service can be described as basic and fundamental and a core to any agency and any helping professional that is providing a service to the community. Based on these suggestions, what is required is ongoing training and education for service providers which would address these issues associated with professional conduct, nonverbal behaviour and improved modes of communication. It is not surprising that the suggestions and comments made are not overzealous or exceptional in nature.

## Chapter 5

### Implications and Recommendations

The purpose of this research study was to explore the experiences of immigrant women of their interactions with non-profit organizations and public social service agencies in the Region of Waterloo. While there have been some research on the topic of service provision to newcomers, there are limited studies that pay attention to the gender of the service users.

As noted at the outset of this paper, the number of immigrants arriving in Waterloo Region has increased significantly in recent years. This growing shift in the demographics of the Region's population means that currently one in five residents is an immigrant (Miedema & Vandebelt, 2006; Region of Waterloo Public Health, 2004). While there is a growing body of research and reports on topics related to immigrants, the focus has primarily been on immigrants and the Canadian labour market needs. Immigrant women have been identified as having needs that are unique (MacLeod & Shimn, 1990; Rockhill & Tomic, 1994). This study focused on immigrant women and their experiences. A search of the current literature indicates that women experience immigration and settlement differently than their male counterparts (Oxman-Martinez et al., 2000; Truelove, 2000).

Immigrant women arriving in Canada have experienced different forms of loss that make them feel vulnerable. The loss experienced may have been as a result of war,



migration or their inability to resume the career they had back in their country of origin. One respondent described an immigrant's identity as 'existing in a state of flux' as a result of living in a new country. The sense of vulnerability was a theme in most of the women's discourse in this study. Add to this other feelings expressed such as feeling alienated, ignored, disappointed, stressed and fearful. These feelings shape a newcomer woman's reality in Canada and are the baggage that she carries with her in her interactions with others.

The experiences shared by the participants of the study provide an insight into what they perceive constitutes a good experience or a negative experience as service users. From these accounts, attributes for each type of experience emerged. The features identified for a good service included being polite, helpful, respectful, supportive and kind. The result of this type of service was that the user felt hopeful, safe, respected, gained a sense of belonging and reported an increase in their self-esteem and confidence. The behaviours identified for a negative experience were being ignored and patronized and the service provider acting unapproachable, abrupt, rude and unhelpful. The impact on the service user was that they felt hurt, ashamed, pained, frustrated, fearful and angry. Some felt upset enough to leave the agency and refuse to return.

Part of this study was to obtain from the participants suggestions about how to improve the service they were receiving. It seemed reasonable to request the user of the service to identify gaps in the service delivery that would improve it. Means of communication and conduct of worker were the main areas identified. The attributes

named are really part of the basic skills in helping that social workers and others in social service professions should be familiar with. In an effort to address the communication gap, applying microskills in the helping process include attending behaviour and basic listening skills would be helpful. Issues around behaviour and professional conduct are addressed by ethics, policies and procedures of each agency.

In reviewing the findings of this research and the suggestions for improvement that the participants provided, two areas stood out for me. First, I was struck at the simplicity of what was required in terms of changes. I struggled with this as the characteristics that were identified as a barrier to service appeared to be simple in nature such as not making eye contact or being rude, yet were prevalent throughout the different agencies. This led me to realize the deep rooted nature of these behaviours and how embedded they are in our systems and that systems are difficult to change. It is too ambitious to hope that the findings of this study can change existing systems; however, it is intended to raise an awareness of how services are delivered to different populations of people, more specifically immigrant women.

The second issue that was of significance for me as a researcher was the finding that ethno-cultural specific agencies were not identified by the participants as providing a better quality of service in comparison to the 'mainstream' agencies. This result dispels the often-held notion that ethno-specific serving agencies provide an enhanced service to newcomer women. The implication of this finding is that ethno-cultural agencies themselves need to be vigilant and aware of the quality of services they provide to the wide variety of newcomers they serve. While the use of multilingual staff

has its many benefits, these employees should be also aware of biases or prejudices that they themselves may have. These biases may be rooted in political affiliation from their countries of origin, tribes, sects or ethnicities that they may belong to or their religious beliefs. Staff from these agencies should be involved in training that addresses the unique biases that they as ethno-cultural workers may have. Finally, what this finding speaks to as well is that there are mainstream organizations that are delivering services to newcomer women in a way that is producing positive outcomes for them.

An increase of awareness is a fundamental starting point for change. Diversity can be a difficult arena for some service providers and agencies to maneuver through. In the field, as a practitioner, one often hears the question: “How do you work with an immigrant family?” This sincere and genuine question highlights the often challenging situation that some workers find themselves in and their need for effective tools.

This increase in awareness involves greater understanding and empathy which were identified as areas for improvements by this study’s participants. In situations where it is appropriate, time should be taken to understand and be aware of the newcomer woman’s journey, the loss she may have experienced, what those losses were and what they mean to her. From this, her level of vulnerability can be assessed and as a service provider, it can provide a framework to work from and to understand the social context of the user. The reality of many agencies and organizations is that there can be barriers that employees and volunteers face that hinders their ability to interact with clients such as newcomer women in a fashion that allows for this sharing of information. For example, there are the caseload realities that front-line service

providers must manage. With time constraints and increasingly larger client caseloads, service providers may find themselves in positions where taking time to getting to know their client, regardless of their cultural background, is a luxury. What this research is suggesting is that as workers attempt to create rapport with their clients or service users that they work from a space of awareness that the newcomer woman they are working with may have several barriers facing her. Establishing this professional relationship can be challenging for some workers in different agencies. Front-line workers should have the opportunity to advocate on behalf of their clients such as newcomer women, if working with these individuals require more of their time. What this evolves into is a need for social service and government funded agencies to look at how they deliver their services to newcomer women who face cultural barriers. In the same way, that information flyers are translated into different languages and interpreters are regularly employed, management levels at agencies should look at making the necessary organizational and structural changes to reduce the barriers that many newcomer women face.

Working from this space of awareness requires intentionality. This means being purposeful as to how one listens and responds keeping in mind how one's own biases and values influence their response. What is important in this style of interacting is that the service provider is acting with capability and selecting from a range of alternative actions with a style that adapts to different individuals and cultures (Ivey & Ivey, 2007). "Lack of intentionality shows...when the helper persists in using only one skill, one definition of the problem even when that approach isn't working" (p.17). An example

of this was Fatimah's experience as the worker tried to 'book a time' for her. It was evident that the approach of repeating the same phrase three times was not working. Fatimah pointed out that if the worker had used the word 'appointment' she would have clearly understood what was being said. An intentional approach would have been to select another phrase that would have conveyed the message more clearly to the recipient of the information. Ivey & Ivey (2007) aptly describes it as "digging into your bag of skills" (p. 17). This bag of skills that a service provider possesses should contain different tools for different individuals since members of the same culture or religious background are not homogeneous.

This intentionality should also have an impact on the language that service providers use. English was not identified as a barrier to communication by the research participants, rather it was the use of the English language that was of issue including the tone, speed, pitch, pronunciation, slang and more importantly the use of professional jargon which contributed to mutual frustration for both parties involved in the interaction. As service providers there is a level of mindfulness that should be applied to our use of words. This requires what Jassay Narayan refers to as decoding our language; simplifying it, breaking it down, using the original word then providing alternatives along with definitions if it is perceived that the receiver of the information is not clearly understanding what is being transmitted (J. Narayan, SOCWK222R lecture, October, 2004).

Relationship building is closely connected with intentionality and purposefulness (Ivey & Ivey, 2007). Establishing professional relationships through

rapport is a key means. This can translate into simple acts such as smiling and inquiring about her cultural background and how she came to Canada. This will in turn serve as an invitation to the newcomer woman to talk about her story. Assessing is a useful tool in that it allows a worker to consider a newcomer woman's ability to comprehend what is being said, her linguistic skills and her knowledge of the Canadian system. If a worker is in a position to be able to have a brief conversation about how she arrived to Canada, it would provide some background information and help in developing rapport.

In writing how social workers can either be coercive or helpful depending on their assessment of the individual and their circumstances, Lena Dominelli (2002) has described social work as being an "oppressive caring profession" (p. 28). In order to address this, we must look at "how the interpersonal dynamics between the social workers and their clients can be reshaped" but keep in mind that we should not ignore "the importance of employers not oppressing their employees" (p.33). She goes on to say that workers need to "engage in deconstructing their own understandings and ways of conceptualizing the world" and there is a need for workers "to critically engage with clients from backgrounds other than their own" (Dominelli, 2002, p.93). When examining the various social work approaches to address social diversity and oppression, Guetiérrez & Lewis (1999) refer to working with an ethnic-sensitive approach which involves: understanding the importance of culture in the everyday lives of the program participants, self-knowledge regarding one's own values and social position; skills in cross-cultural communication and non-judgmental listening; and the

ability to be open and learn from others (as cited in Dominelli, Lorenz & Soyden, 2001, p. 46).

There are steps that can be taken by agencies to address the cultural competency of their staff. The initial step is for agencies and organizations to provide their staff, including volunteers, with culturally relevant education and training. While the effectiveness of one-time instruction in this area is recognized as a way to increase awareness of issues related to diversity, on-going training is required in order to sustain learning surrounding this issue. As needs and issues facing newcomer women evolve, a continuous education process should be part of any social service agency (Canadian Council on Social Development, 1997). Cultural understanding is a process that should be developed throughout the career of a helping professional and others who work in the helping field.

Training should be customized to meet the needs of the agency, the type of service it delivers and staff and volunteers working there. Incorporating feedback from users of the service is also beneficial. More specifically, engaging the ethno-cultural community in the development of cultural sensitivity training has proven to be effective. The Canadian Council on Social Development in their policy document entitled 'Inclusive Social Policy Development: Ideas for Practitioners' have said that "most institutions need to increase their institutional capacity to become more inclusive" (1997, p.4). The council describes such a delivery model to be responsive, accessible and culturally appropriate. An effective way of doing this is as Bowl (2007)

notes; by engaging local ethno-cultural communities in helping to shape and change agencies' delivery model so that it is more accessible.

Engaging with ethno-cultural communities to help effect change in the system requires advocacy for those changes. In light of the element of fear that was expressed by some of the participants of this study, it is essential that advocating with them and on their behalf will become necessary. One example is the creation of an avenue where complaints about the service can be safely routed without fear of reprisal.

Often I have heard service providers ask the question: "When I meet with an Iraqi, Chinese, Indian, Muslim, etc. woman, how do I...?" From my understanding in field practice, in reviewing the research literature and from this study, there is no one tool to be used with all ethnically diverse women. Each woman has a different experience upon arrival to Canada. Compare the financially independent skilled female professional from Pakistan to a woman who lived in a refugee camp in Sudan. Each will come with experiences that shape what they think of themselves and how they position themselves within the Canadian context. 'Cultural intentionality' with such a diverse population requires the use of diverse tools such as multiple responses. Ivey and Ivey (2007) sums it up quite simply in their chapter on developing appropriate intervention strategies and techniques, by saying: *"If your first response doesn't work, you need to be ready with another."* (p.46).



### *Suggestions for Future Research*

There have been studies carried out looking at the views of ethno-cultural service users and different health services such as mental health and prenatal care (Bender, Harbour, Thorp & Morris, 2001; Bowl, 2007). Other studies have examined the position of immigrant women as they relate to the labour market, domestic violence, change in power relationships within the family and accessing medical health care (Darvishpour, 2002; Mojab, 1999; Ng & Estable, 1987; Sword et al., 2006). There is a need to continue to investigate how women experience the immigration process differently than their male counterparts in order to gain further understanding of how they incorporate that experience into their identity here in Canada.

From the information that was shared by the research participants, there was a great deal of information that proved interesting for further research but unfortunately were too broad for the scope of this study. For example, one of the participants noted that though both herself and her friend were Muslim and wore hijabs, the service they received was quite different, with the friend receiving the 'better' service. The only difference that she could identify was that her friend is Canadian born and White. There would be merit in exploring the differences in the experiences of newcomer women who are visible minorities to immigrants who are not. How would their interactions with service providers differ? Investigating the experiences of White Muslim to an immigrant Muslim woman would also be noteworthy. This would begin to shed light on the forms of discrimination that users of services experience. Future research could look at the relationship of other significant identifies that might show similarities or

differences in a woman's interactions with service providers. This would include a woman's faith, immigration status, country of birth, accent, English language level, age, marital status or number of children.

Some of the participants of this study had graduate and post-graduate level of education and were professionals while other respondents did not indicate their educational level or work experience as this was not part of the interview guide used in this study. It would be interesting to investigate the differences in experience for women who were highly educated and those who were not. Newcomer women arriving in Canada come with varying levels of education which include professionals with PhD's, those with some high school level of education and those who have little formal schooling and low levels of literacy. What are the experiences for these women who have more advanced education versus those who have very little? Are those with more advanced, formal education better able to maneuver their way through the system and redress service that they feel to be unacceptable?

What was somewhat evident was that those participants who were articulate and possessed a strong command of the English language, they appeared to have coped better with the negative experiences. That being said; however, some interviewees who appeared to have a lower level of English reported having very little to no 'poor' experiences. This would also be an area to explore further to investigate how language skills and education level of service users impact on and correlate with their experience. Does better command of the English language give newcomer women more confidence to address inconsistencies in the service they receive? Some of the participants indicated

that they had learned English in their home country prior to arriving in Canada; is there a difference for those who received their English instruction while in their country of origin compared to those who receive ESL classes in Canada?

Though the age range was broad, there did not appear to be any relevant correlation between a woman's experience and her age. Their status upon arrival was a stronger indicator, as those who arrived as refugee claimants appeared to access services immediately and to a greater extent. A possible explanation for this could be that spouse sponsored and skilled workers are deemed to be more independent classifications; therefore, women entering in under these classifications are expected to be more self sufficient, from the point of view of the government. Women who were sponsored by their husbands showed a similar pattern as they did not access service until being in the country after several years. A few had mentioned in their interview that they had had no need to since their husband took care of things for them, while the women who had arrived with their husbands as either refugee claimants or as skilled workers often accessed the service equally with their partner.

Further research that looks at women who enter Canada single compared to those who enter with a male partner might reveal notable differences. The sample in this research ranged in age from 20 to 60 years old and the length of time living in Canada ranged from 3 months to 10 years. It would be helpful to examine the relationship between the length of time in Canada relative to usage of service, however from the result of this study, such an examination should take into account the woman's marital or common law status.

An additional area for research would be to investigate any significant differences in experiences for women who have come from war-torn countries where they endured trauma. As this current research shows, a woman's journey to Canada has an impact on her interactions; if that journey is compounded with fleeing one's home, how is her experience further shaped? Studying characteristics such as language levels, education, age and immigration and marital status would provide significant insight into features that may have an impact on their experiences with service providers. Finally, this study explored immigrant women's experiences as service users and the effects of the interaction on them but additional investigation as to how the women cope with 'poor' or negative experiences would be worthy as it would provide information on their resiliency.

With the increasing cultural diversity within Canadian society, it is necessary that more Canadian research emerge on topics related to gender and immigration. In addition, it would be helpful to have a closer examination of agencies and organizations that have made changes to their mode of delivery of service to one that is more inclusive and what their successes and challenges have been.

### *Conclusion*

The purpose of this qualitative research project was to gain a clearer understanding of the experiences of newcomer women as service users. What I learned from the stories the women shared with me was that their journey to Canada plays a remarkable role in how they see themselves within a Canadian context. Their journeys

and the associated experiences help to shape their identity that they bring to each interaction they have with a service user. The vulnerability that newcomer women identified feeling can be linked back to their journey to Canada and the different forms of loss that they may have experienced.

When newcomer women access service there is a broad range of non-profit and social service agencies that they perceive to provide both a positive and a poor level of service. An assumption that is sometimes made is that ethnocultural specific serving agencies have the potential to provide a better service to newcomer women. What was found was that mainstream and ethnocultural specific agencies were identified almost equally as delivering a 'poor' quality of service to women who are new to Canada. In reflecting on this finding, it appears that even within agencies that work exclusively with newcomers, training of staff is necessary. It is precarious to assume that ethno-cultural staff will be more sensitive to and understanding of all immigrant women than staff from a mainstream agency. Care should be taken when staff and client are from conflicting regions of the world. Staff would need to be trained to have a heightened awareness of the potential tension that could arise. Training that targets increasing self-awareness should be required of staff of both 'mainstream' and ethno-cultural agencies.

The characteristics of a service that was perceived as being 'poor' only served to intensify feelings of vulnerability for immigrant women. In some instances this led to the participants making what I believe were some very difficult choices as they attempted to exercise their power. For some, it meant not returning to access the service that they were entitled to; while others reluctantly did so. This highlighted the power

imbalance that occurs with social service agencies as service providers and immigrant women as service users. This is further emphasized in that some of the participants did not feel that they could voice their dissatisfaction with the service they received.

Whether this fear was as a result in part of past experiences with positions of power in their country of origin or just not understanding the current system they are in, and the complaint process available to them, the dread they felt was very real for the women.

What stood out as being hopeful was that the features of the service that they felt were good were what I categorize as basic attending skills that are respectful and compassionate. The suggestions for improvement of service delivery that were given by the participants were practical and easily applicable and they were grouped as: communication, behaviour/professional conduct, empathy and understanding, education and training and the dissemination of information. The themes that were threaded through these categories were respect, sensitivity, patience, politeness and understanding of different cultures. I struggled with these attributes because they appeared to be so simple yet so lacking. What is required to implement these skills in service provider's day to day work is to first educate in an effort to raise awareness, then to put into practice intentionality; a purposefulness in establishing a relationship with the user of the service.

Part of this research study is to help bring to light the voices and the stories of the participants; to provide a space where service providers can hear them. It is anticipated that a summary of the findings will be made available to agencies and that they will be contacted in order to present the findings and to generate discussion

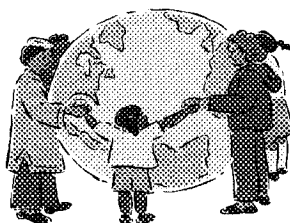
surrounding implementing change in their agencies. Importantly as well, I hope to share a summary of the stories shared and the findings in the community where newcomer women are in order for them to draw comfort in hearing these shared experiences and to know that they are being heard by people in positions of power. This is very important to me as a researcher as I was challenged in the community by several women who demanded of me: “When you get all this information, do you have the power to change anything?” I will attempt to honour their wishes by making this information available to agencies, organizations and people who have the power to make changes.

In reflection, conducting this research has lead me to a greater understanding and appreciation of immigrant women and their struggles prior to arriving in Canada and how their interactions with agencies have worked together to shape their reality. I was shocked and disappointed to hear some of the stories they shared with me. I was impressed with the concrete suggestions that were made for improvement of services. It reinforced for me, that this study was able to provide a space where the women felt safe enough to be critical of and offer constructive criticism of the services they received.

The number of women who wanted to participate in this study indicated to me that they had a story to share and I was disappointed that I could not give all the women who had heard about the study, the space to participate. This has given me further encouragement to share with those who participated and those who were unable to do so, the findings of this study and to continue this discussion about their experiences at a community level and at the same time, at an agency level.

## Appendix A





A STUDY IS BEING CONDUCTED ON

IMMIGRANT WOMEN'S EXPERIENCES OF SOCIAL SERVICE  
AGENCIES IN THE WATERLOO REGION

MY NAME IS GILLIAN WELLS AND I AM A MASTERS OF SOCIAL WORK  
STUDENT AT  
WILFRID LAURIER UNIVERSITY IN KITCHENER

I AM INVITING IMMIGRANT WOMEN TO TAKE PART IN THIS  
RESEARCH STUDY THAT I AM DOING.

FOR THE STUDY, I WILL ASK WOMEN TO ANSWER SOME  
QUESTIONS AND TALK ABOUT THEIR EXPERIENCE WITH SERVICES  
RECEIVED AT SOCIAL SERVICE AGENCIES AND ORGANIZATIONS IN  
THE WATERLOO REGION.

I AM DOING THIS TO IMPROVE OUR UNDERSTANDING OF HOW  
NEWCOMER WOMEN FEEL WHEN THEY RECEIVE SERVICES AND TO  
IDENTIFY ANY SUGGESTIONS THEY MAY HAVE ON HOW WE COULD  
IMPROVE SERVICE DELIVERY.

PLEASE NOTE THAT A MINIMUM OF LEVEL 3 IN ENGLISH IS  
REQUIRED. FOR FURTHER INFORMATION OR IF YOU ARE  
INTERESTED IN BEING A PART OF THIS RESEARCH,

PLEASE CONTACT ME AT: (519) 635-6550

THANK YOU FOR YOUR TIME AND GENEROSITY.

## Appendix B

## INFORMATION LETTER & INFORMED CONSENT STATEMENT

You are invited to be part of a research study that is collecting information about immigrant women's experiences with social service agencies in the Waterloo Region.

The purpose of this study is to look at these experiences in order to understand how immigrant women perceive their experiences with the services they receive, to document those experiences and to hear how they would suggest agencies change their practices so immigrant women feel more comfortable using their service.

### INFORMATION

I understand that I am being asked to participate in a research study being done by Gillian Wells, a Masters of Social Work student at the Faculty of Social Work at Wilfrid Laurier University, Kitchener.

This will be a qualitative study involving 15 to 20 participants, using a semi-structured interview that will be audiotaped then written out word for word. I understand that I have the right to refuse to have the interview audiotaped. I understand that the length of time for the interview is about 60 to 90 minutes. The tapes, transcripts and the notes from the interview will be kept in a locked cabinet and the researcher and her supervisor, Ginette Lafrenière, will be the only persons who will have access to them. If someone other than the researcher transcribes the tapes from the interviews, the transcriber will keep all information from the interviews confidential.

I understand that the records of my interview will be kept confidential and that **I will not be identified** in any publication or discussion. My name, family description, country of origin and where I live will be changed so that I cannot be easily known.

During the interview I will avoid mentioning the names of agencies and especially the names of people who work at those agencies. If the names of the agencies and their workers are mentioned in the interview they will be removed from the transcripts, notes and will not be included in any of the write-ups, including the thesis, or presentation of the findings.

The researcher will likely use quotations from the tapes in a final report and any publication of the material. I know that I will have the opportunity to review any quotations taken from the tape of my interview and check the use of my quotation if I choose to.

The information that I provide in the interview will appear in the thesis. It is possible that the findings from this study will be provided or presented to the following social service agencies:

- Region of Waterloo, Social Services
- Waterloo Region Family and Children's Services
- House of Friendship
- City of Kitchener
- KW Counselling
- Catholic Family Counselling

- The Working Center
- United Way
- Our Place, Ontario Early Years Centre
- Focus For Ethnic Women
- The Multicultural Center
- Kitchener YMCA Cross Cultural Centre

I understand that I have the right to have all questions about the study answered by the researcher in detail so that I clearly understand the answer. If I have any questions about the research, the procedure used, my rights or any other research related concern I may contact the researcher or her supervisor, Ginette Lafrenière.

Your participation in this study is voluntary; you may decline to participate without penalty. If you decide to participate, you may stop being a part of the study at any time without being punished and without loss of benefits to which you are otherwise entitled. If you withdraw from the study before data collection is completed your data will be returned to you or destroyed. You have the right to leave out any question(s)/procedure(s) you choose.

You will be given a \$20 Food Basic voucher as compensation for your time and for participating in the study. Should you choose to withdraw from the study; you will still receive the voucher.

This project has been reviewed and approved by the University Research Ethics Board at Wilfrid Laurier University. If you feel you have not been treated according to the descriptions in this form, or your rights as a participant in research have been violated during the course of this project, you may contact: Dr. Bill Marr, Chair, University Research Ethics Board, Wilfrid Laurier University, (519) 884-0710, extension 2468.

If you have any question or wish to withdraw our consent please contact:

Gillian Wells  
MSW student  
Faculty of Social Work  
Wilfrid Laurier University  
Email: [well1561@wlu.ca](mailto:well1561@wlu.ca)

or

Dr. Ginette Lafrenière  
Professor  
Faculty of Social Work  
Wilfrid Laurier University  
(519) 884-0710 ext.5237

1. I have read and understand the information given to me. I have a copy of this form.  
I agree to be part of this study.

\_\_\_\_\_ Yes

\_\_\_\_\_ No

2. You may use a tape recorder for this interview.

\_\_\_\_\_ Yes

\_\_\_\_\_ No

3. You may use quotations from my interview.

\_\_\_\_\_ Yes

\_\_\_\_\_ No

4. I would like the findings from the study to be mailed to me when the research is finished.

\_\_\_\_\_ Yes

\_\_\_\_\_ No

If you indicate 'yes', please fill in your name and mailing address below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Participant's signature \_\_\_\_\_

Date \_\_\_\_\_

Investigator's signature \_\_\_\_\_

Date \_\_\_\_\_

## Appendix C

## INTERVIEW GUIDE

1. I am wondering if you can tell me when and how you came to Waterloo?  
Probes:
  - a. Age
  - b. With whom
  - c. Children
  - d. Job/school
  - e. Time of year
  - f. How long ago
  - g. How did it feel when you first came?
  - h. How did you find the people in the community?
  - i. Who helped you to settle in?
2. Can we talk about your settlement.  
Probes:
  - a. What did you need when you came?
  - b. How did you learn about the social services?
  - c. Where did you go?
  - d. Did you go alone or with someone?
  - e. What services did you receive?
  - f. Were you able to find what you needed?
3. Did the help that you received address the need that you had?
4. Can we talk about your experiences with those agencies that you went to.  
Probes:
  - a. Describe for me a 'good' experience. How did that make you feel?
  - b. Describe for me a 'poor' experience. How did that make you feel?
  - c. What made it good/poor?
5. If you had an opportunity to tell the person who works at the agency how they can improve their service to newcomers such as yourself, what would you tell them?
6. Is there anything else you would like to add?

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